| Fill in this information to identify your | case: | |
|---|---|------------------------------------|
| United States Bankruptcy Court for the: CENTRAL DIST. OF CALIFORNIA | | |
| Case number (if known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your Steven government-issued picture First Name First Name identification (for example, Joseph your driver's license or Middle Name Middle Name passport). **Dombrovsky** Last Name Bring your picture Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you Vyacheslav have used in the last 8 First Name First Name years Middle Name Middle Name Include your married or **Dombrovsky** maiden names. Last Name Last Name Only the last 4 digits of $xxx - xx - 9 \quad 6 \quad 9 \quad 3$ your Social Security number or federal OR **Individual Taxpayer** Identification number (ITIN) Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer **Identification Numbers** Business name Business name (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names

Business name

Business name

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 2 of 69

| Del | otor 1 Steven Joseph Don | nbrovsky | | Case number | (if known) | | |
|-----|---|---|---|---|---|--|--|
| | | About Debtor 1: | | About D | ebtor 2 (Spouse Only in a Joint Case): | | |
| | | | | | | | |
| | | EIN | | EIN | _ | | |
| | | | | EIN — | | | |
| 5. | Where you live | | | If Debtor | 2 lives at a different address: | | |
| | | 4300 Gayle Drive | | | | | |
| | | Number Street | | Number | Street | | |
| | | | | _ | | | |
| | | | | _ | | | |
| | | Tarzana | CA 91356 | | | | |
| | | City | State ZIP Code | City | State ZIP Code | | |
| | | Los Angeles County | | County | | | |
| | | If vour mailing add | ress is different from | If Debtor | 2's mailing address is different | | |
| | | the one above, fill it | t in here. Note that the | from you | from yours, fill it in here. Note that the court | | |
| | | court will send any n mailing address. | otices to you at this | will send any notices to you at this mailing address. | | | |
| | | · · | | | | | |
| | | Number Street | | Number | Number Street | | |
| | | P.O. Box | | P.O. Box | | | |
| | | City | State ZIP Code | City | State ZIP Code | | |
| 6. | Why you are choosing | Check one: | | Check o | ne: | | |
| | this district to file for bankruptcy | الثا | 30 days before filing this lived in this district longer er district. | peti | er the last 180 days before filing this tion, I have lived in this district longer n in any other district. | | |
| | | I have another (See 28 U.S.C. | reason. Explain. § 1408.) | | ve another reason. Explain. e 28 U.S.C. § 1408.) | | |
| Р | art 2: Tell the Court Al | oout Your Bankrup | tcy Case | | | | |
| 7. | The chapter of the Bankruptcy Code you | | | | d by 11 U.S.C. § 342(b) for Individuals Filing check the appropriate box. | | |
| | are choosing to file under | Chapter 7 | | | | | |
| | MINGI | Chapter 11 | | | | | |
| | | — | | | | | |
| | | Chapter 12 | | | | | |
| | | | | | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 3 of 69

| Deb | otor 1 Steven Joseph Do | Steven Joseph Dombrovsky | | | Case number (if known) | | |
|-----|---|-------------------------------|---|--|---|--|--|
| 8. | How you will pay the fee | court fo | hay the entire fee when I file my pe or more details about how you may p th cash, cashier's check, or money o your attorney may pay with a credit | pay. Typically, if you are pay order. If your attorney is subl | ring the fee yourself, you may mitting your payment on your | | |
| | | | I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). | | | | |
| | | By law than 15 fee in i | est that my fee be waived (You ma, a judge may, but is not required to, 50% of the official poverty line that a nstallments). If you choose this optifiee Waived (Official Form 103B) and | waive your fee, and may do applies to your family size an ion, you must fill out the App | so only if your income is less d you are unable to pay the | | |
| 9. | Have you filed for | □ No | | | | | |
| | bankruptcy within the last 8 years? | ✓ Yes. | | | | | |
| | | District Ce | ntral District Of California | When 11/02/2011 MM / DD / YYYY | Case number 1:11-bk-22800 | | |
| | | District | | When | Case number | | |
| | | District | | When | Case number | | |
| 10. | Are any bankruptcy | ☑ No | | , 55, TTT | | | |
| | cases pending or being filed by a spouse who is | Yes. | | | | | |
| | not filing this case with you, or by a business | Debtor | | Relationsh | ip to you | | |
| | partner, or by an | District | | | Case number, | | |
| | affiliate? | | | MM / DD / YYYY | if known | | |
| | | Debtor | | Relationsh | ip to you | | |
| | | District | | When MM / DD / YYYY | Case number,if known | | |
| 11. | Do you rent your residence? | Yes. | Go to line 12. Has your landlord obtained an evicti residence? | on judgment against you an | d do you want to stay in your | | |
| | | | No. Go to line 12. Yes. Fill out Initial Statement A and file it with this bankruptcy p | - | Against You (Form 101A) | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 4 of 69

| Deb | tor 1 Steven Joseph Don | nbrov | /sky | | Cas | se number (if known) | | |
|--------------------------------------|---|-------------------------|------------|---|--|---|------------------------------|-----------------------------------|
| Pa | Report About Ar | ıy Bı | ısine | sses You Own as | a Sole Propriet | or | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | | | Go to Part 4. Name and location of l | business | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Name of business, if any Number Street | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | | Single Asset Re | iness (as defined in al Estate (as defined defined in 11 U.S.C. ter (as defined in 11 | 11 U.S.C. § 101(27A)) I in 11 U.S.C. § 101(51 § 101(53A)) | | ode |
| Chapter 11 Bankruptc are you a | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> | can | set ap | filing under Chapter 11 propriate deadlines. If nt balance sheet, state f these documents do r | you indicate that you ment of operations, or | u are a small business cash-flow statement, a | debtor, you nd federal ir | nust attach your ncome tax return |
| | debtor? | $\overline{\mathbf{V}}$ | No. | I am not filing under (| Chapter 11. | | | |
| | For a definition of small business debtor, see 11 U.S.C. § 101(51D). | | No. | I am filing under Chap the Bankruptcy Code | | T a small business deb | otor accordii | ng to the definition in |
| | | | Yes. | I am filing under Chap Bankruptcy Code. | oter 11 and I am a sr | mall business debtor a | ccording to | the definition in the |
| Pa | Report If You Ov | vn o | r Hav | e Any Hazardous | Property or Any | Property That N | eeds Imn | nediate Attention |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable | | No Yes. | What is the hazard? | | | | |
| | hazard to public health or safety? Or do you own any property that needs immediate attention? | | | If immediate attention | is needed, why is it | needed? | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | Where is the property | Number Street | | | |
| | | | | | City | | State | ZIP Code |

Debtor 1 Steven Joseph Dombrovsky Case number (if known)

About Debtor 1:

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one: I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 6 of 69

| Deb | otor 1 | Steven Joseph Dor | nbrov | sky | | Case number (if | know | n) |
|-----|--|--|--------------|--|--------|--|-------|--|
| P | art 6: | Answer These C | Questi | ons for Reporting Pเ | ırpos | ses | | |
| 16. | What k have? | ind of debts do you | 16a. | | | sumer debts? Consumer de rimarily for a personal, family, | | re defined in 11 U.S.C. § 101(8) usehold purpose." |
| | | | 16b. 16c. | money for a business or No. Go to line 16c. Yes. Go to line 17. | inves | iness debts? Business debatement or through the operation the that are not consumer or business debts. | of th | |
| | | | | | | | | |
| 17. | - | re you filing under hapter 7? | | No. I am not filing under | · Chap | oter 7. Go to line 18. | | |
| | any exc exclude admini- are pai- availab | estimate that after empt property is ed and strative expenses d that funds will be le for distribution ecured creditors? | | - | | • | - | xempt property is excluded and to distribute to unsecured creditors? |
| 18. | | any creditors do timate that you | | 1-49 50-99 100-199 200-999 | | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. | | uch do you te your assets to th? | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. | | uch do you te your liabilities to | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 7 of 69

| Debtor 1 | Steven Joseph D | ombrovsky | Case number (if known) | | |
|----------|-----------------|--|---|--|--|
| Part 7: | Sign Below | | | | |
| For you | | I have examined this petition, and I declare u and correct. | nder penalty of perjury that the information provided is true | | |
| | | • | aware that I may proceed, if eligible, under Chapter 7, 11, 12, stand the relief available under each chapter, and I choose to | | |
| | | If no attorney represents me and I did not pay fill out this document, I have obtained and rea | y or agree to pay someone who is not an attorney to help me ad the notice required by 11 U.S.C. § 342(b). | | |
| | | I request relief in accordance with the chapte | r of title 11, United States Code, specified in this petition. | | |
| | | | ealing property, or obtaining money or property by fraud in in fines up to \$250,000, or imprisonment for up to 20 years, 3571. | | |
| | | X Steven Jeseph Dembroveley Debter 1 | X Signature of Debtor 2 | | |
| | | Steven Joseph Dombrovsky, Debtor 1 Executed on 11/20/2017 MM / DD / YYYYY | Executed on | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 8 of 69

| Debtor 1 | Steven Joseph Don | nbrovsky | Case number (if known) |
|--|-------------------|--|---|
| Part 7: | Sign Below | | |
| For you | | I have examined this petition, and I declare unde and correct. | r penalty of perjury that the information provided is true |
| | | If I have chosen to file under Chapter 7, I am awa or 13 of title 11, United States Code. I understan proceed under Chapter 7. | re that I may proceed, if eligible, under Chapter 7, 11, 12, d the relief available under each chapter, and I choose to |
| If no attorney represents me and I did not pay or agree to pay someone who is not an affill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(I | | | |
| | | I request relief in accordance with the chapter of | itle 11, United States Code, specified in this petition. |
| | | I understand making a false statement, concealing connection with a bankruptcy case can result in find or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571 | g property, or obtaining money or property by fraud in nes up to \$250,000, or imprisonment for up to 20 years, |
| | | X Steven Joseph Dombrovsky, Debtor 1 | X Signature of Debtor 2 |
| | | Executed or 11/20/2017 | Executed on |

MM / DD / YYYY

MM / DD / YYYY

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 9 of 69

| Debtor 1 | Steven Joseph Dom | nbrovsky | | Case number (if know | n) |
|------------------------|---|-----------------------------|----------------------------|--|--|
| For your at represente | torney, if you are d by one | eligibility to proceed | under Chapter 7, 11, 12, 6 | r 13 of title 11 United Sta | informed the debtor(s) about tes Code, and have explained the certify that I have delivered to |
| | not represented by r, you do not need page. | x Signature of Atto | orney for Debtor | 342(b) and, in a case in that the information in the | which § 707(b)(4)(D) applies, e schedules filed with the petition 11/20/2017 MM / DD / YYYY |
| | | Printed name Law Offices O | of Hagen & Hagen | | |
| | | Firm Name 4559 San Blas | | | |
| | | Woodland Hills | s | CA State | 91364 ZIP Code |
| | | Contact phone | (818) 501-6161 | Email address jeff@h | agenhagenlaw.com |
| | | 143754 Bar number | | CA State | - |

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

| 1. | against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).) Steven Joseph Dombrovsky and Raisa Elena Dombrovsky, Chapter 13, 1:11-bk-22800-MB, filed 11/02/2011 |
|-----|--|
| | Central District Of California, San Fernando Valley Division, Hon. Martin Barash, discharge received 04/05/2017 |
| 2. | (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).) None |
| | |
| 3. | (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).) None |
| 4. | (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).) None |
| | |
| | eclare, under penalty of perjury, that the foregoing is true and correct. |
| ⊏X€ | ecuted at Woodland Hills , California Signature of Debtor |
| Dat | e: 11/20/2017 |

Signature of Joint Debtor

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 11 of 69

| Fill in this inf | ormation to i | dentify your case | : | | |
|---------------------------------|----------------------|------------------------------|--------------------------------|---|---------------------------------|
| Debtor 1 | Steven First Name | Joseph Middle Name | Dombrovsky Last Name | - | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | - | |
| United States Bar | nkruptcy Court for | r the: CENTRAL DIS | T. OF CALIFORNIA | _ | |
| Case number (if known) | | | | | Check if this is amended filing |

Official Form 106Sum

Part 1:

Summarize Your Assets

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | | Your assets Value of what you own |
|----|--|------------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) | |
| | 1a. Copy line 55, Total real estate, from Schedule A/B | \$1,671,691.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$21,860.75 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$1,693,551.75 |
| | Part 2: Summarize Your Liabilities | |
| | ditt. | |
| | dit 2. | Your liabilities Amount you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | Amount you owe |
| | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | Amount you owe \$998,499.00 |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | Amount you owe \$998,499.00 |

Part 3: **Summarize Your Income and Expenses**

| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$16,381.06 |
|----|---|-------------|
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$11,867.59 |

\$1,050,264.76

Your total liabilities

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 12 of 69

| Debtor 1 | | Steven Joseph Dombrovsky | ase number (if known) | |
|----------|---|---|------------------------------------|---------------------|
| Pa | art 4: | Answer These Questions for Administrative and Statistica | al Records | |
| 6. | Are you | ı filing for bankruptcy under Chapters 7, 11, or 13? | | |
| | □ No ☑ Ye | . You have nothing to report on this part of the form. Check this box and sub s | mit this form to the court with yo | ur other schedules. |
| 7. | What ki | ind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual prima family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. | | cal purposes. 28 U.S.C. § 159. | , |
| | | our debts are not primarily consumer debts. You have nothing to report on s form to the court with your other schedules. | this part of the form. Check this | box and submit |
| 8. | | ne Statement of Your Current Monthly Income: Copy your total current mon Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | nthly income from | \$13,207.40 |
| 9. | Copy th | ne following special categories of claims from Part 4, line 6 of Schedule E | E/F: | |
| | | | Total claim | |
| | From P | art 4 on Schedule E/F, copy the following: | | |
| | 9a. Do | mestic support obligations. (Copy line 6a.) | \$0.0 | <u>o</u> |
| | 9b. Ta | xes and certain other debts you owe the government. (Copy line 6b.) | \$39,765.7 | 6_ |
| | 9c. Cla | aims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.0 | 0 |
| | 9d. Stu | udent loans. (Copy line 6f.) | \$0.0 | <u>0</u> |

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$39,765.76

| | Fill in this info | ormation to i | dentify your case | and this filing: | | |
|---|---------------------------------|----------------------|------------------------------|--------------------------------|---|-------|
| | Debtor 1 | Steven First Name | Joseph Middle Name | Dombrovsky Last Name | _ | |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ | |
| | United States Bar | nkruptcy Court fo | or the: CENTRAL DIS | T. OF CALIFORNIA | _ | |
| | Case number (if known) | | | | ☐ Check if this is an amended filing | |
| | Official Form | 106A/B | | | | |
| | Schedule A/ | B: Propert | у | | | 12/15 |
| 1 | the asset in the ca | tegory where y | ou think it fits best. B | e as complete and accurate | n asset fits in more than one category, list e as possible. If two married people are nore space is needed, attach a separate | |

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:

| 1. Do you own or have any legal or equita | ble interest in any residence, building, land | d, or similar property? | | |
|---|--|--|--|--|
| No. Go to Part 2.✓ Yes. Where is the property? | | | | |
| 1.1. 4300 Gayle Drive, Tarzana, California 91356 | What is the property? Check all that apply. ✓ Single-family home | Do not deduct secured cla amount of any secured cla Creditors Who Have Claim | | |
| Residence | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? | Current value of the entire property? \$1,378,520.00 | Current value of the portion you own? \$1,378,520.00 | |
| Los Angeles County | | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee Title | | |
| | Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Check if this is community property (see instructions) | | |
| | Other information you wish to add about property identification number: | this item, such as local | _ | |

Real Property (including community property of nonfiling spouse Raisa Domborvsky): Residence, 4300 Gayle Drive, Tarzana, California 91356, 4 bedrooms, 3 bathrooms, 3,033 square feet of living space, single family residence, 100.0% fee title together with Raisa Domborvsky, acquired in 2002 for \$780,000.00. Debtor Dombrovsky estimates the (entire) value of the property at \$1,378,520.00 based upon a zillow.com search done 11/20/2017, subject to hypothetical costs of sale of 08.0% or \$110,281.60, a first position deed of trust in favor of CitiMortgage with a payoff balance of \$513,437.00 requiring monthly payments of principal, interest and impounds of \$3,331.28, \$0.00 in arrears as a result of a loan modification, a second position deed of trust in favor of SLS with a payoff balance of \$366,430.00 requiring monthly payments of principal and interest of \$4,650.00, \$188,000.00 in arrears, and a homestead exemptoin of \$100,000.00, therefore net equity for the estate of \$288,371.40. Note that Debtor Dombrovsky rents out two rooms in his residence to adult daughter Inessa Dombrovsky who pays monthly rent of \$1,200.00.

| Debtor 1 | Steven Joseph Dombrovsky | | Case number (if known) | |
|--|---|---|---|---|
| Las Veç | orth Los Feliz Street, Unit 133, gas, Nevada 89156 Property 1 | What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land | Do not deduct secured cla amount of any secured cla Creditors Who Have Claim Current value of the entire property? \$140,210.00 | |
| County | | Investment property Timeshare Other Who has an interest in the property? | Describe the nature of you interest (such as fee sim entireties, or a life estate Fee Title | ple, tenancy by the |
| | | Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anot Other information you wish to add aboroperty identification number: | | nunity property |
| Street, fee title value of sale of | Unit 133, Las Vegas, Nevada 891 together with Raisa Domborvsk f the property at \$140,210.00 bas | operty of nonfiling spouse Raisa Do 156, 2 bedrooms, 2 bathrooms, 1,38 sy, acquired in 2005 for \$189,000.00 sed upon a zillow.com search done ear of liens, therefore net equity for pays monthly rent of \$950.00. | 3 square feet of living space. Debtor Dombrovsky estiment on 11/20/2017, subject to | ce, townhouse, 100.0% mates the (entire) hypothetical costs of |
| 1.3. 2873 Ar Mexico | ncho Avenue, Las Cruses, New | What is the property? Check all that apply. ✓ Single-family home | Do not deduct secured cla amount of any secured cla Creditors Who Have Clain | |
| | Property 2 | Duplex or multi-unit building Condominium or cooperative | Current value of the entire property? | Current value of the portion you own? |
| County | | | \$152,961.00 Describe the nature of your interest (such as fee simple entireties, or a life estate | ple, tenancy by the |
| | | Who has an interest in the property? | Fee Title | |
| | | Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anot | Check if this is comm (see instructions) | nunity property |
| | | Other information you wish to add about property identification number: | out this item, such as local | |
| Las Cru 100.0% (entire) costs o \$118,63 equity f | ses, New Mexico 88001, 3 bedro fee title together with Raisa Don value of the property at \$152,96 f sale of 08.0% or \$12,236.88, an 2.00 requiring monthly payment or the estate of \$22,092.12. The | operty of nonfiling spouse Raisa Do coms, 2 bathrooms, 1,591 square fe nborvsky, acquired in 2006 for \$155 1.00 based upon a zillow.com searc d a first position deed of trust in fav is of principal, interest and impound property is occupied by tenant And own for all of your entries from Part 1, i | et of living space, single fa 5,000.00. Debtor Dombrovs ch done on 11/20/2017, sub yor of Seterus with a payof ds of \$693.31, \$0.00 in arrea dre Chacon who pays month | imily residence, sky estimates the ject to hypothetical f balance of ars, therefore net thly rent of \$975.00. |
| enti | ies for pages you have attached for | Part 1. Write that number here | → | \$1,671,691.00 |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 15 of 69

| Debto | r 1 Steven | Joseph Dombrovsky | Ca | se number (if known) | |
|---|--|---|--|---|---|
| Par | t 2: Desci | ribe Your Vehicles | | | |
| - | No | | | | |
| 3. C | Cars, vans, truc | ks, tractors, sport utility | vehicles, motorcycles | | |
| [| — | | | | |
| 3.1. Make: Model Year: | l: | Caliber SE Sport Wa | Check one. Debtor 1 only Debtor 2 only | amount of any secured clain Creditors Who Have Claim Current value of the | ms on Schedule D: s Secured by Property. Current value of the |
| | | 87,000 | At least one of the debtors and anothe | \$ 1,725.00 | \$1,725.00 |
| prope Doml Sport estim searc clear 4. V | erty of nonfilir brovsky): 200 t Wagon, 87,00 nated \$1,725.0 ch done on 09, of liens (exen Vatercraft, aircr Examples: Boats | ng spouse Raisa 8 Dodge Caliber SE 00 miles, worth an 0 per a kbb.com /06/2017, free and npt). aft, motor homes, ATVs | (see instructions) s and other recreational vehicles, other ve | | |
| | | | • | _ | \$1,725.00 |
| | | | | | |
| Do yo | ou own or have | any legal or equitable in | nterest in any of the following items? | | portion you own? Do not deduct secured |
| E | Ex <i>amples:</i> Major No | appliances, furniture, line | | by property of ponfiling | \$5,000,00 |
| Ľ | VI 100. Desemb | | | y property or norming | ψο,σσσ.σσ |
| | Examples: Telev | | | • | |
| _ | | | luding community property of nonfilin At residence (exempt). | ng spouse Raisa | \$1,000.00 |
| | | ues and figurines; painting | gs, prints, or other artwork; books, pictures, collections; other collections, memorabilia, co | - | |
| <u> </u> | ☑ No ☐ Yes. Describ | De | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 16 of 69

| Deb | btor 1 Steven Joseph Dombrovsky Case | e number (if known) | |
|------|---|---|---|
| 9. | Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool take canoes and kayaks; carpentry tools; musical instruments | bles, golf clubs, skis; | |
| | ✓ No ☐ Yes. Describe | | _ |
| 10. | . Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment | | |
| | ✓ No ☐ Yes. Describe | | - |
| 11. | Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | | |
| | ☐ No ☐ Yes. Describe Clothing (including community property of nonfiling sp. Dombrovsky): At residence, on persons (exempt). | oouse Raisa\$1,000.00 | - |
| 12. | Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloon gold, silver | m jewelry, watches, gems, | |
| | ☐ No ☐ Yes. Describe Jewelry (including community property of nonfiling spo Dombrovsky): At residence, on persons (exempt). | ouse Raisa\$2,000.00 | - |
| 13. | Non-farm animals Examples: Dogs, cats, birds, horses | | |
| | ☐ No ☐ Yes. Describe Non-farm animals (including community property of no Dombrovsky): At residence, one dog. | onfiling spouse Raisa\$0.00 | - |
| 14. | Any other personal and household items you did not already list, including any heal did not list | llth aids you | |
| | ✓ No ☐ Yes. Give specific information | | _ |
| 15. | Add the dollar value of all of your entries from Part 3, including any entries for page attached for Part 3. Write the number here | | _ |
| Pa | Part 4: Describe Your Financial Assets | | |
| Do y | you own or have any legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. | |
| 16. | Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hat petition | and when you file your | |
| | ☐ No ☑ Yes | Cash: \$20.00 | _ |
| 17. | Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares brokerage houses, and other similar institutions. If you have multiple account institution, list each. | | |
| | ☐ No ☑ YesInstitution name: | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 17 of 69

| Deb | tor 1 St | even Joseph | Dombrovsky | Case number (if known) | |
|-----|-----------------|---|---|---|------------|
| | 17.1. | Checking acc | spouse accoun | es of money (including community property of nonfiling Raisa Dombrovsky): US Bank, 'Silver Elite Checking,' t 1-534-6446-5944, in both Debtor Dombrovsky's and combrovsky's names. | \$1,000.00 |
| | 17.2. | Checking acc | spouse | ts of money (including community property of nonfiling Raisa Dombrovsky): US Bank, 'Checking,' account 1- 16-1285, in Debtor Dombrovsky's name alone. | \$1,000.00 |
| 12 | Ronds mi | itual funds or | publicly traded stoc | <u> </u> | Ψ1,000.00 |
| 10. | | | | ith brokerage firms, money market accounts | |
| | ☑ No | | | | |
| | Yes | | Institution or issuer | name: | |
| 19. | an interest | - | k and interests in in rtnership, and joint | corporated and unincorporated businesses, including venture | |
| | ✓ No ✓ Yes G | Sive specific | | | |
| | | ation about | | | |
| | them | | Name of entity: | % of ownership: | |
| 20. | Negotiable | instruments inc | clude personal checks | negotiable and non-negotiable instruments s, cashiers' checks, promissory notes, and money orders. ot transfer to someone by signing or delivering them. | |
| | informa | Give specific ation about | Issuer name: | | |
| 21. | | t or pension ac Interests in IRA profit-sharing p | A, ERISA, Keogh, 40 | 1(k), 403(b), thrift savings accounts, or other pension or | |
| | □ No | | | | |
| | ست | ist each it separately. | Type of account: | Institution name: | |
| | | | • • | Retirement or pension accounts (including community property of nonfiling spouse Raisa Dombrovsky): 401 (k) plan of Debtor Dombrovsky with Fidelity Invetments, account 20878 (exempt). | \$9,115.75 |
| 22. | Security d | eposits and pr | epayments | | |
| | | Agreements wi | • | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications | |
| | ✓ No | | | | |
| 22 | _ | (A contract for | | nstitution name or individual: syment of money to you, either for life or for a number of years) | |
| 23. | No No | (A contract for | a specific periodic pa | syment of money to you, entire for the or for a number of years) | |
| | | | Issuer name and d | escription: | |
| 24. | | | IRA, in an account 9A(b), and 529(b)(1). | in a qualified ABLE program, or under a qualified state tuition program. | |
| | ✓ No | | Institution name on | d description. Separately file the records of any interests. 11 LLS C. \$ 524(a) | |
| 25 | _ | | | d description. Separately file the records of any interests. 11 U.S.C. § 521(c) rty (other than anything listed in line 1), and rights or | |
| LJ. | powers ex | ercisable for y | | ry ₍ outor than anything nated in line 1), and rights Of | |
| | Yes. G | Give specific ation about then | n | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 18 of 69

| Deb | otor 1 Steven Joseph Don | nbrovsky | Case number (if known) | |
|-----|--|--|---|--|
| 26. | | rks, trade secrets, and other intellectual properses, websites, proceeds from royalties and licen | | |
| | ✓ No | ,, , | and agreement | |
| | Yes. Give specific information about them | | | |
| 27. | Licenses, franchises, and oth Examples: Building permits, ex | er general intangibles clusive licenses, cooperative association holding | gs, liquor licenses, professional licen | ses |
| | ☐ No | | | |
| | information about them pro- | censes, franchises, other general intangi operty of nonfiling spouse Raisa Dombro ensed by the State Of California to sell a value). | vsky): Debtor Dombrovsky is | \$0.00 |
| Mor | ney or property owed to you? | | | Current value of the |
| | , р | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you | | | |
| | ☑ No | | | |
| | Yes. Give specific information | | Federa | l: |
| | about them, including wheth you already filed the returns | | State: | |
| | and the tax years | | Local: | |
| 29. | | ım alimony, spousal support, child support, main | tenance, divorce settlement, propert | y settlement |
| | ✓ No☐ Yes. Give specific information | tion | Alimony: | |
| | | | Maintenance: | |
| | | | Support: | |
| | | | Divorce settlement | : |
| | | | Property settlemen | t: |
| 30. | | s you bility insurance payments, disability benefits, sic al Security benefits; unpaid loans you made to s | | |
| | ✓ No✓ Yes. Give specific information | tion | | |
| 31. | Interests in insurance policies Examples: Health, disability, or | s life insurance; health savings account (HSA); c | redit, homeowner's, or renter's insura | nce |
| | □ No | | | |
| | Yes. Name the insurance | | | |
| | company of each policy and list its value | Company name: | Beneficiary: Su | ırrender or refund value: |
| | | Interests in insurance policies (including community property of nonfiling spouse Raisa Dombrovsky): Health insurance with Kaiser Permanente, paid by Debtor | | |
| | | Dombrovsky and Raisa Dombrovsky, term only, no value. | N/A | \$0.00 |
| | | term only, no value. | IN/A | <u> </u> |

| Debt | tor 1 Steven Joseph Dom | ıbrovsky | Case number (if known) | |
|------|--|--|----------------------------|-------------|
| | | Interests in insurance policies (including community property of nonfiling spouse Raisa Dombrovsky): Vision insurance with Vision Service Plan (VSP), paid by Debtor Dombrovsky and Raisa Dombrovsky, term only, no value. | N/A | \$0.00 |
| | | Interests in insurance policies (including community property of nonfiling spouse Raisa Dombrovsky): Property insurance for residence with Automobile Club Of Southern California, paid via mortgage impound, for the Nevada rental property, paid via homeowners association fees/dues, and for the New Mexico rental property with Allstate Insurance via mortgage impound, 'term' only, no value. | N/A | \$0.00 |
| | | Interests in insurance policies (including community property of nonfiling spouse Raisa Dombrovsky): Automobile insurance with Automobile Club Of Southern California, paid by Debtor Dombrovsky and Raisa Dombrovsky, term only, no value. | N/A | \$0.00 |
| | | Interests in insurance policies (including community property of nonfiling spouse Raisa Dombrovsky): Home warranty insurance with Fidelity Home Warranty Insurance Co., paid by Debtor Dombrovsky and Raisa Dombrovsky, term only, no value. | N/A | \$0.00 |
| 32. | If you are the beneficiary of a live entitled to receive property becar | | policy, or are currently | |
| 33. | | whether or not you have filed a lawsuit or made nent disputes, insurance claims, or rights to sue | de a demand for payment | |
| 34. | Other contingent and unliquid rights to set off claims No Set Describe each claim | lated claims of every nature, including counte | erclaims of the debtor and | |
| 35. | Any financial assets you did r | not already list | | |
| | ✓ No☐ Yes. Give specific informat | ion | | |
| 36. | | rour entries from Part 4, including any entries | _ | \$11,135.75 |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 20 of 69

| Deb | otor 1 | Steven Joseph Dombrovsky Case number (if k | known) |
|-----|-------------|---|---|
| Pa | art 5: | Describe Any Business-Related Property You Own or Have an Interest I | In. List any real estate in Part 1. |
| | | own or have any legal or equitable interest in any business-related property? | <u> </u> |
| 31. | • | | |
| | _ | . Go to Part 6. s. Go to line 38. | |
| | _ | | Current value of the portion you own? Do not deduct secured |
| 38. | Accou | nts receivable or commissions you already earned | claims or exemptions. |
| | ✓ No | | |
| | | s. Describe | |
| 39. | | equipment, furnishings, and supplies les: Business-related computers, software, modems, printers, copiers, fax machines, rugs, teledoesks, chairs, electronic devices | lephones, |
| | ✓ No | s. Describe | |
| 40. | Machi | nery, fixtures, equipment, supplies you use in business, and tools of your trade | |
| | ✓ No | s. Describe | |
| 41. | Invent | ory | |
| | ✓ No | s. Describe | |
| 42. | Interes | sts in partnerships or joint ventures | |
| | ☑ No | | |
| | ☐ Ye | s. Describe Name of entity: % of | of ownership: |
| 43. | Custo | ner lists, mailing lists, or other compilations | |
| | ✓ No | s. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(No Yes. Describe | (41A))? |
| 44. | Any b | usiness-related property you did not already list | |
| | ✓ No | s. Give specific information. | |
| 45. | | e dollar value of all of your entries from Part 5, including any entries for pages you have ed for Part 5. Write that number here | \$0.00 |
| Pa | art 6: | Describe Any Farm- and Commercial Fishing-Related Property You Owr If you own or have an interest in farmland, list it in Part 1. | n or Have an Interest In. |
| 46. | Do you | ı own or have any legal or equitable interest in any farm- or commercial fishing-related p | property? |
| | | s. Go to Part 7. | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 21 of 69

| Deb | otor 1 Steven Joseph Dombrovsky | Case number (if known) | |
|-----|--|-----------------------------|---|
| | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | Farm animals | | |
| | Examples: Livestock, poultry, farm-raised fish No | | |
| | ☑ No □ Yes | | |
| 4Ω | Crops-either growing or harvested | | |
| 40. | | | |
| | ✓ No Yes. Give specific | | |
| | Yes. Give specific information | | |
| 49. | Farm and fishing equipment, implements, machinery, fixtures, and tools o | of trade | |
| | ☑ No | | |
| | Yes | | |
| 50. | Farm and fishing supplies, chemicals, and feed | | |
| | ⋈ No | | |
| | Yes | | |
| 51. | Any farm- and commercial fishing-related property you did not already list | t | |
| | ⋈ No | | |
| | Yes. Give specific | | |
| | information | | |
| 52. | Add the dollar value of all of your entries from Part 6, including any entries attached for Part 6. Write that number here | s for pages you have | \$0.00 |
| | | | |
| Pá | art 7: Describe All Property You Own or Have an Interest in | That You Did Not List Above | 9 |
| 53. | Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership | | |
| | ⋈ No | | |
| | Yes. Give specific information. | | |
| | _ | | 60.00 |
| 54. | Add the dollar value of all of your entries from Part 7. Write that number h | nere → | \$0.00 |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 22 of 69

| Debtor 1 | Steven Joseph Dombrovsky | Case nu | umber (if known) | |
|------------|--|-------------|---------------------------------|----------------|
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. Part ' | 1: Total real estate, line 2 | | • _ | \$1,671,691.00 |
| 56. Part 2 | 2: Total vehicles, line 5 | \$1,725.00 | | |
| 57. Part 3 | 3: Total personal and household items, line 15 | \$9,000.00 | | |
| 58. Part 4 | 4: Total financial assets, line 36 | \$11,135.75 | | |
| 59. Part | 5: Total business-related property, line 45 | \$0.00 | | |
| 60. Part (| 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. Part 7 | 7: Total other property not listed, line 54 | +\$0.00 | | |
| 62. Total | personal property. Add lines 56 through 61 | \$21,860.75 | Copy personal property total +_ | \$21,860.75 |
| 63. Total | of all property on Schedule A/B. Add line 55 + line 62 | | | \$1,693,551.75 |

| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|------------|--|--|
| Debtor 1 | Steven | Joseph | Dombrovsky | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| (1 , 0, | | | | | |
| United States Bankruptcy Court for the: CENTRAL DIST. OF CALIFORNIA | | | | | |
| Case number | | | | | |
| (if known) | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

| 1. | Which set of exemptions are you claiming? | Check one only, e | even if your spouse is filing | with you. | | |
|----|--|--------------------------------------|---------------------------------------|------------------------------------|--|--|
| | You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | |
| 2. | 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | |
| | ef description of the property and line on hedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | | |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | | | |

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

| (| |
|---|--|
| | No |
| | Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? |
| | □ No |
| | Yes |

| Debtor 1 Steven Joseph Dombrovsky | | Case number (if known) | | | | | | |
|--|---|--------------------------------------|-------------------------|--|------------------------------------|--|--|--|
| Part 2: | Additional Page | | | | | | | |
| | ption of the property and line on /B that lists this property | Current value of the portion you own | | ount of the mption you claim | Specific laws that allow exemption | | | |
| | | Copy the value from Schedule A/B | | eck only one box for h exemption | | | | |
| property on Domborvs Drive, Tarze bedrooms, of living specific property of 100.0% feed Domborvs \$780,000.00 estimates at \$1,378,5 search dorested by the feed of 10,281.60 in favor of balance of payments impounds a result of position depayoff balamonthly payoff balamonthly payoff \$4,650.00 homestead therefore residence to 1,200.00.00. | | \$1,378,520.00 | | \$100,000.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 704.730 | | | |
| Brief descrip | | \$1,725.00 | $\overline{\mathbf{Q}}$ | \$1,725.00 | C.C.P. § 704.010 | | | |
| (approx. 87 Motor vehicle property of Dombrovs Sport Wag estimated done on 05 (exempt). | ge Caliber SE Sport Wagon 7000 miles) icles (including community f nonfiling spouse Raisa ky): 2008 Dodge Caliber SE ion, 87,000 miles, worth an \$1,725.00 per a kbb.com search 2006/2017, free and clear of liens | · | <u> </u> | 100% of fair market value, up to any applicable statutory limit | - | | | |
| community Raisa Dom (exempt). | otion: If goods & furnishings (including by property of nonfiling spouse nbrovsky): At residence Chedule A/B:6 | \$5,000.00 | | \$5,000.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 704.020 | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 25 of 69

| Steven Joseph Dombrovsky | | Case number | (if known) |
|--|--------------------------------------|---|------------------------------------|
| Part 2: Additional Page | | | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: Electronics (including community property of nonfiling spouse Raisa Dombrovsky): At residence (exempt). Line from Schedule A/B:7 | \$1,000.00 | \$1,000.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 704.020 |
| Brief description: Clothing (including community property of nonfiling spouse Raisa Dombrovsky): At residence, on persons (exempt). Line from Schedule A/B:11 | \$1,000.00 | \$1,000.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 704.020 |
| Brief description: Jewelry (including community property of nonfiling spouse Raisa Dombrovsky): At residence, on persons (exempt). Line from Schedule A/B:12 | \$2,000.00 | \$2,000.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 704.040 |
| Brief description: Retirement or pension accounts (including community property of nonfiling spouse Raisa Dombrovsky): 401(k) plan of Debtor Dombrovsky with Fidelity Invetments, account 20878 (exempt). Line from Schedule A/B: 21 | \$9,115.75 | \$9,115.75 100% of fair market value, up to any applicable statutory limit | C.C.P. § 704.110(d) |

| Fill in this inf | ormation to | identify your case | : | | | |
|----------------------------------|--------------------|---|---|---------------------------|------------------------------|--------------------|
| Debtor 1 | Steven | Joseph | Dombrovsky | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Neme | Loot Nama | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court fo | or the: CENTRAL DIS | T. OF CALIFORNIA | | | |
| Case number | | | | | ☐ Check if this is | s an |
| (if known) | | | | | amended filing | |
| Official Form | 106D | | | | | |
| | | Who Have Cla | ims Secured b | v Property | | 12/15 |
| Scriedule D. | Creditors | Willo Have Cla | iiiis Secured b | rioperty | | 12/13 |
| correct informatio | n. If more space | e is needed, copy the | ed people are filing too Additional Page, fill it d case number (if kno | out, number the entri | | |
| on the top of any | additional page | s, write your name an | a case namber (ii kno | W11). | | |
| 1. Do any credit | ors have claim | s secured by your pro | perty? | | | |
| | | | court with your other sch | edules. You have noth | ning else to report on th | is form. |
| ✓ Yes. Fill | in all of the info | mation below. | | | | |
| Part 1: Lis | t All Secured | l Claims | | | | |
| | | | | | | |
| | | creditor has more than | | | | |
| | • | ely for each claim. If mo list the other creditors | | Column A Amount of claim | Column B Value of collateral | Column C Unsecured |
| | • | ns in alphabetical order | | Do not deduct the | that supports this | portion |
| creditor's nam | e. | | | value of collateral | claim | If any |
| 2.1 | | | property that | \$513,437.00 | \$1,378,520.00 | |
| CitiMortgage, In | c. | secures the | ciaim: | | <u> </u> | |
| Creditor's name POBox 78015 | | Residence | | | | |
| Number Street | | | | | | |
| | | | to way file the alaim is | . Chaolaoll that annia | | |
| | | Continge | te you file, the claim is | : Спеск ан глаг арргу. | | |
| Phoenix | AZ 85062 | | | | | |
| City | State ZIP Cod | le Disputed | | | | |
| Who owes the dek | ot? Check one. | Nature of lie | n. Check all that apply | | | |
| Debtor 1 only Debtor 2 only | | | ment you made (such a | | car loan) | |
| ☐ Debtor 2 only ☐ Debtor 1 and D | ebtor 2 only | — | lien (such as tax lien, n | nechanic's lien) | | |
| _ | the debtors and | another \square | nt lien from a lawsuit | | | |
| ☐ Check if this o | | Other (III) | cluding a right to offset) f Trust-First Position | 1 | | |
| to a communit | | 2004 0 | | | | |
| Date debt was inc | urred 02/200 | 5 Last 4 digits | of account number | 1 1 8 5 | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$513,437.00

| Debtor 1 | Steven Joseph Dombrovsky | | | Case number (if known) | | | | |
|--|--|------------------------|---|--|---|-----------------------------------|--|--|
| Additional Page After listing any entries on this page sequentially from the previous page. | | | | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | | |
| 2.2 Seterus Creditor's nam POBox 10 Number Sti | | | Describe the property that secures the claim: Rental Property 2 | \$118,632.00 | \$152,961.00 | | | |
| Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least Check i | State the debt? Chec 1 only | nly ors and another | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med) Judgment lien from a lawsuit Other (including a right to offset) Deed Of Trust-First Position | s mortgage or secured car loan) nechanic's lien) | | | | |
| 2.3 SLS Mortg Creditor's nam 8742 Luce | gage ne Boulevard | 2006 | Last 4 digits of account number Describe the property that secures the claim: Residence | 1 0 0 1 \$366,430.00 | \$1,378,520.00 | | | |
| Highlands City Who owes t Debtor 1 Debtor 2 At least Check i | State the debt? Chect 1 only 2 only 1 and Debtor 2 of one of the debtor if this claim relations. | nly ors and another | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Judgment lien from a lawsuit Other (including a right to offset) Deed Of Trust-Second Position | mortgage or secured echanic's lien) | car loan) | | | |
| to a cor | mmunity debt vas incurred <u>(</u> | 01/2005 | Last 4 digits of account number | 7 0 6 4 | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$485,062.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$998,499.00

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 28 of 69

| Debtor ' | Steven Joseph Dombrovsky | | | Case number (if known) | |
|---------------------------------|---|--------------------------|--|--|-----|
| Part | 2: List Others to Be Notifie | d for a | Debt That You | Already Listed | |
| example then lis list the | e, if a collection agency is trying to c t the collection agency here. Similar | ollect fro ly, if you | m you for a debt yo have more than on | tcy for a debt that you already listed in Part 1. For ou owe to someone else, list the creditor in Part 1, and e creditor for any of the debts that you listed in Part 1, to be notified for any debts in Part 1, do not fill out or | |
| 1 | Barrett Daffin Frappier Treder & | Weiss | | On which line in Part 1 did you enter the creditor? | 2.3 |
| | Name 20955 Pathfinder Road | | | Last 4 digits of account number | |
| | Number Street Unit 300 | | | | _ |
| | Diamond Bar | CA | 91765 | - | |
| | City | State | ZIP Code | | |
| 2 | Barrett Daffin Frappier Treder & | Weiss. | | On which line in Part 1 did you enter the creditor? | 2.3 |
| | Name 4004 Belt Line Road | | | Last 4 digits of account number | |
| | Number Street Unit 100 | | | | _ |
| | OTHE TOO | | | - | |
| | Addison | TX | 75001-4320 | - | |
| | City | State | ZIP Code | - | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 29 of 69

| Fill in this inf | ormation to id | entify your c | ase | t . | | | | | | |
|---|--|---|---|---|------------|---|-------------------------|------------|--|---|
| Debtor 1 | Steven | Joseph | | Dombrovsky | 1 | | | | | |
| | First Name | Middle Name | | Last Name | | | | | | |
| Debtor 2 | | | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | | Last Name | | | | | | |
| United States Bar | nkruptcy Court for | the: CENTRAL | . DIS | ST. OF CALIFORNIA | | | | | | |
| Case number (if known) | | | | | | | | | Check if this is a amended filing | in |
| Official Form | 106E/F | | | | | | | | | |
| Schedule E/ | F: Creditors | Who Have | e U | Insecured Claims | | | | | | 12/15 |
| If more space is n to this page. On this page of this page | eeded, copy the Fine top of any add at All of Your Paters have priority to Part 2. The priority unsecuted claim listed, identity and nonpriority and nonprior | Part you need, fi itional pages, we RIORITY Unsunsecured clain red claims. If a ntify what type of y amounts. As n | ill it vrite seco ms a cred f clainuch | Igainst you? Ilitor has more than one priority of the in it is. If a claim has both priority as possible, list the claims in a | unserity a | cured on the control of the control | claim priori orde | , list the | tach the Continuate creditor separate creditor separate bunts, list that clair rding to the creditor | ely for each m here and or's name. If |
| • | other creditors in F | | ms, i | ill out the Continuation Page of | Рап | 1. If n | nore i | nan o | ne creditor noids a | particular |
| (For an explar | nation of each type | of claim, see the | e ins | tructions for this form in the ins | tructi | on boo | | n | Priority amount | Nonpriority amount |
| 2.1 | | | | | | \$4 | 4,765 | 5.76 | \$4,765.76 | \$0.00 |
| California Franc | | | - La | st 4 digits of account number | 1 | 5 | 1 | 5 | | |
| Priority Creditor's Nam POBox 942867 | e | | | nen was the debt incurred? | 201 | | · | <u> </u> | | |
| Number Street | | | . **: | ien was the debt incurred: | 201 | 3 | | | - | |
| | | | - As | of the date you file, the claim | is: (| Check | all th | at app | ly. | |
| | | | . 🏻 | Contingent Unliquidated | | | | | | |
| Sacramento | | 94267 | . H | Disputed | | | | | | |
| City Who incurred the | | ZIP Code | Tv | no of DDIODITY uncourred of | nim. | | | | | |
| Debtor 1 only | debt? Check of | ie. | ıу | pe of PRIORITY unsecured cla Domestic support obligations | aim: | | | | | |
| Debtor 2 only | | | M | Taxes and certain other debts | you | owe th | e gov | ernme | ent | |
| Debtor 1 and D | • | aathar | Ï | Claims for death or personal in | • | | • | | | |
| _ | the debtors and a | | _ | intoxicated | | | | | | |
| Is the claim subje | claim is for a com | mumiy debt | | Other. Specify | | | | | | |
| No No | CL LU UIISEL! | | | | | | | | | |
| Yes | | | | | | | | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 30 of 69

| Debtor 1 Steven Joseph Dombrovsky | Steven Joseph Dombrovsky Ca | | | |
|--|---|---|-----------------|--------------------|
| Part 1: Your PRIORITY Unsecured Cl | aims Continuation Page | | | |
| After listing any entries on this page, number them previous page. | n sequentially from the | Total claim | Priority amount | Nonpriority amount |
| 2.2 | | \$35,000.00 | \$35,000.00 | \$0.00 |
| Internal Revenue Service Priority Creditor's Name POBox 7346 Number Street | _ | 9 <u>6</u> <u>9</u> <u>3</u> 15-2016 | _ | |
| Philadelphia PA 19101-7346 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ☐ Yes | As of the date you file, the claim is: Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you Claims for death or personal injury intoxicated Other. Specify | owe the governme | • | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 31 of 69

| Debtor 1 Steven Joseph Dombrovsky | Case number (if known) |
|--|---|
| Part 2: List All of Your NONPRIORITY | Unsecured Claims |
| 3. Do any creditors have nonpriority unsecured c ☐ No. You have nothing to report in this part. S ✓ Yes | laims against you? Submit this form to the court with your other schedules. |
| If a creditor has more than one nonpriority unsecu type of claim it is. Do not list claims already include | the alphabetical order of the creditor who holds each claim. red claim, list the creditor separately for each claim. For each claim listed, identify what ded in Part 1. If more than one creditor holds a particular claim, list the other creditors in secured claims, fill out the Continuation Page of Part 2. Total claim |
| 4.1 | \$12,000.00 |
| Nonpriority Craditor's Nama | Last 4 digits of account number 1 1 6 4 |
| c/o Shapero & Shapero | When was the debt incurred? 2014 |
| | As of the date you file, the claim is: Check all that apply. |
| 5950 Canoga Avenue Unit 404 | ☐ Contingent ☐ Unliquidated |
| | Disputed |
| Woodland Hills CA 91367 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Judgment Creditor |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 32 of 69

| Debtor 1 Steve | en Joseph Don | nbrovsky | Case number (if known) | | | |
|---|--|--|--|--|--|--|
| Part 3: Lis | t Others to Be | ut a Debt That You Already Listed | | | | |
| For example, creditor in Pa debts that yo | if a collection ag arts 1 or 2, then I u listed in Parts | gency is trying to east the collection a | ified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. collect from you for a debt you owe to someone else, list the original agency here. Similarly, if you have more than one creditor for any of the litional creditors here. If you do not have additional parties to be notified for nit this page. | | | |
| California Franc | hise Tax Board | d | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name POBox 2952 | | | Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Sacramento City | CA State | 95812 ZIP Code | — Last 4 digits of account number | | | |
| Internal Revenu | e Service | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name | | | Line 2.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Ondon | 117 | 04204 0020 | — Last 4 digits of account number | | | |
| Ogden City | UT State | 84201-0039 ZIP Code | _ | | | |
| - 9 | | - | | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 33 of 69

| Debtor 1 | Steven Joseph Dombrovsky | Case number (if known) | | | |
|----------|--------------------------|------------------------|--|--|--|
| | | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|-----------------------------|-----|---|------------------|-------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| nomi art i | 6b. | Taxes and certain other debts you owe the government | 6b. | \$39,765.76 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. - | \$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$39,765.76 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | ^{6i.} ◀ | \$12,000.00 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$12,000.00 |

| Fill in this inf | ormation to i | dentify your case | : | | |
|---------------------------------|----------------------|------------------------------|--------------------------------|-----|----------------------|
| Debtor 1 | Steven First Name | Joseph Middle Name | Dombrovsky Last Name | _ | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ | |
| United States Ba | nkruptcy Court fo | r the: CENTRAL DIS | T. OF CALIFORNIA | | |
| Case number (if known) | | | | | Check if amended |
| Official Form | 106G | | | | |
| Sabadula G | · Evecutor | · Contracts an | d Unavnirad Las | COC | |

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

| 1. [| Do you have any executory contrac | ts or unexpired | leases? | |
|--------|--|--------------------|-----------------------|--|
|]] | | | | chedules. You have nothing else to report on this form. It is are listed on Schedule A/B: Property (Official Form 106A/B). |
| i | | se, cell phone). | • | tract or lease. Then state what each contract or lease s for this form in the instruction booklet for more examples of |
| | Person or company with whom | you have the co | ntract or lease | State what the contract or lease is for |
| 2.1 | Andre Chacon Name 2873 Ancho Avenue Number Street | | | Residential lease Contract to be ASSUMED |
| | Las Cruces City | NM State | 88005 ZIP Code | _ |
| 2.2 | Inessa Dombrovsky Name 4300 Gayle Drive Number Street | | | Residential lease (daughter rents a portion of Debtors' residence) Contract to be ASSUMED |
| | Tarzana City | CA State | 91356 ZIP Code | _ _ |
| 2.3 | LaQuita Coney Name 2050 Los Feliz Drive Number Street Unit 133 | | | _ Residential lease Contract to be ASSUMED _ |
| | Las Vegas City | NV State | 89156 ZIP Code | _ |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 35 of 69

| F | ill in this | information to | identify your case | e: | | | |
|-----|----------------------------|---|---|-------------------------|---|-----------------|---|
| D | ebtor 1 | Steven | Joseph | | mbrovsky | | |
| _ | 0 | First Name | Middle Name | Lasi | t Name | | |
| | ebtor 2 Spouse, if fili | ng) First Name | Middle Name | Las | t Name | | |
| U | nited States | Bankruptcy Court f | or the: CENTRAL DI | ST. OF C | ALIFORNIA | | |
| С | ase number | | | | | | ☐ Check if this is an |
| (if | known) | | | | | | amended filing |
| | | | | | | | |
| | | rm 106H | | | | | |
| So | hedule | H: Your Cod | debtors | | | | 12/15 |
| nee | eded, copy ge. On the t | the Additional Pag | e, fill it out, and numb nal Pages, write your r | er the en | tries in the boxes I case number (if | s on tl know | rect information. If more space is ne left. Attach the Additional Page to this in). Answer every question. |
| | ☐ No ✓ Yes | | | | | | |
| 2. | include Ar | izona, California, Id Go to line 3. Did your spouse, fo No | - | a, New Me | exico, Puerto Rico, | , Texa | ? (Community property states and territories as, Washington, and Wisconsin.) |
| | ب | Yes In which community | state or territory did yo | u live? | California | Fi | Il in the name and current address of that person. |
| | | Raisa Elena Don | nbrovskv | | | _ | |
| | • | | former spouse, or legal equ | ivalent | | | _ |
| | | Number Street | | | | | _ |
| | | Tarzana | | CA | 91356 | | _ |
| | | City | | State | ZIP Code | | _ |
| 3. | person sh creditor o | nown in line 2 agai n <i>Schedule D</i> (Off | n as a codebtor only i | f that per edule E/F | son is a guaranto (Official Form 10 | or or o | r if your spouse is filing with you. List the cosigner. Make sure you have listed the), or <i>Schedule G</i> (Official Form 106G). Use |
| | Colum | n 1: Your codebto | r | | | • | Column 2: The creditor to whom you owe the debt |
| | | | | | | (| Check all schedules that apply: |
| 3. | Spous | se Name Not Ent | ered | | | - | Schedule D, line |
| | | Stroot | | | | - - | Schedule E/F, line 1 |
| | Number | Street | | | | | Schedule G, line |
| | | | | | | | Barrett Daffin Frappier Treder & Weiss |
| | City | | State | ZIP | Code | _ | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Des Main Document Page 36 of 69

| Fill in this inforr | nation to identify | y your case: | | | |
|---------------------------------|-----------------------|------------------------------|--------------------------------|-----|---|
| Debtor 1 | Steven First Name | Joseph Middle Name | Dombrovsky Last Name | Che | eck if this is: |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | An amended filing |
| United States Bank | ruptcy Court for the: | CENTRAL DIST | OF CALIFORNIA | □ | A supplement showing postpetition chapter 13 income as of the following date: |
| Case number (if known) | | | | | MM / DD / YYYY |

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: | Describe | Employ | /ment |
|---------|----------|--------|-------|
| | | | |

| 1. | Fill in your employment information. | | Del | btor 1 | | | | Del | btor 2 or non-filing sp | oous | se |
|----|--|-----------------------|-----------|-------------------------|--------------------|----------|-------------|------|-------------------------|------|----------|
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | | | oloyed employed | | | | Employed Not employed | | |
| | additional omployoro. | Occupation | <u>Au</u> | to De | ealership l | Manage | r | _ | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Pe | rry Fo | ord Mazda | a Of Sai | nta Barbara | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | 0 Hitc mber S | chcock Wa | ау | | Nun | nber Street | | |
| | | | | | | | | | | | |
| | | | Sa | nta B | arbara | CA | 93105 | | | | |
| | | | City | , | | State | Zip Code | City | St | ate | Zip Code |
| | | How long employed the | nere? | 2 1 | 11/2016 | | | | | | |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Dobtor 1

For Dobtor 2 or

| | | | For Deptor 1 | non-filing spouse |
|----|---|------|--------------|-------------------|
| 2. | List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. | \$5,510.40 | \$4,623.67_ |
| 3. | Estimate and list monthly overtime pay. | 3. + | \$0.00 | \$0.00 |
| 4. | Calculate gross income. Add line 2 + line 3. | 4. | \$5,510.40 | \$4,623.67 |

Official Form 106l Schedule I: Your Income page 1

| Deb | tor 1 | Steven Joseph Dombrovsky | | Case num | ber (if | known) | | |
|-----|--------------------|--|--------------|-----------------------|---------|--------------|-----------------|-------------------------|
| | | | | For Debtor 1 | | Debtor 2 o | | |
| | Cop | y line 4 here | 4. | \$5,510.40 | | \$4,623.6 | 7 | |
| 5. | List | all payroll deductions: | | | | | _ | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | <u>\$556.31</u> | | \$363.12 | _ | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$0.00 | | \$0.0 | | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$0.00 | | \$0.0 | <u>)</u> | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$0.00 | | \$0.00 | _ | |
| | 5e. | Insurance | 5e. | \$0.00 | | \$0.00 | _ | |
| | | Domestic support obligations | 5f. | \$0.00 | | \$0.00 | _ | |
| | 5g. | Union dues | 5g. | \$0.00 | | \$0.0 | <u>)</u> | |
| | 5h. | Other deductions. Specify: CASDI | 5h. + | \$49.59 | | \$41.6° | <u>1</u> | |
| 6. | Add 5g + | the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h. | 6. | \$605.90 | | \$404.73 | <u>3</u> | |
| 7. | | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$4,904.50 | | \$4,218.9 | <u>1</u> | |
| 8. | | all other income regularly received: | 0- | \$4 000 00 | | * 0.0 | • | |
| | ъа. | Net income from rental property and from operating a business, profession, or farm | 8a. | \$1,200.00 | | \$0.00 | <u>,</u> | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | \$0.00 |) | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | _ | \$0.00 | <u>)</u> | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | \$0.0 |) | |
| | 8e. | Social Security | 8e. | \$0.00 | | \$0.0 | <u> </u> | |
| | 8f. | Other government assistance that you regularly receive | | | | | _ | |
| | | Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | |
| | | Specify: | 8f. | \$0.00 | | \$0.00 |) | |
| | 8a | Pension or retirement income | 8g. | \$0.00 | | \$0.00 | _ | |
| | _ | Other monthly income. | og. | | - | ΨΟΙΟ | <u>-</u> | |
| | | Specify: See continuation sheet | 8h. 🛖 | \$6,057.62 | | \$0.00 |) | |
| 9. | Add | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$7,257.62 | | \$0.0 | <u>-</u> 0 | |
| 10. | | rulate monthly income. Add line 7 + line 9. | 10. | \$12,162.12 | • | \$4,218.9 | <u>=</u> 4 = | \$16,381.06 |
| 11 | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. e all other regular contributions to the expenses that you list in So | chodu | lo I | | | _ | |
| | Inclu | de contributions from an unmarried partner, members of your househ ds or relatives. | | | roomr | nates, and | othe | r |
| | Do n | ot include any amounts already included in lines 2-10 or amounts that | t are n | ot available to pay e | xpense | es listed in | Sche | edule J. |
| | Spec | cify: | | | | 11 | l. + | \$0.00 |
| 12. | incor | the amount in the last column of line 10 to the amount in line 11. me. Write that amount on the Summary of Your Assets and Liabilities | | | | | <u>.</u> . | \$16,381.06 Combined |
| 13 | | opplies. Tou expect an increase or decrease within the year after you file the | nis for | ·m? | | | | monthly income |
| | ` | No. None. | | | | | | |
| | | Yes. Explain: | | | | | | |
| | | | | | | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 38 of 69

| Debtor 1 | Steven Joseph Dombrovsky | | Case nu | mber (if known) |
|----------|----------------------------|---------|--------------|-----------------------------------|
| | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
| | r Monthly Income (details) | | | non ming operate |
| Rent | t-LaQuita Coney-Nevada | | \$950.00 | |
| Rent | t-Andre Chacon-New Mexico | | \$975.00 | |
| Fam | ily Contribution | | \$4,132.62 | |
| | | Totals: | \$6,057.62 | \$0.00 |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 39 of 69

| F | ill in this inform | ation to identify | y your case: | | | Cho | ck if this | ic: | |
|----------|--|---|---|-------------------------|---|--------|------------|-------------------------------|---|
| | Debtor 1 | Steven First Name | Joseph Middle Name | Domb Last Nar | rovsky me | | An ame | ended filing ement showing | postpetition |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Nar | me | | | 13 expenses a | |
| | United States Bankru | uptcy Court for the: | CENTRAL DIST | . OF CALIF | ORNIA | | MM / DI | D / YYYY | _ |
| | Case number (if known) | | | | | | | | |
| 0 | fficial Form 10 | 6J | | | | _ | | | |
| S | chedule J: Yo | ur Expenses | 3 | | | | | | 12/15 |
| nai | as complete and ac rrect information. If me and case numbe | more space is nee | eded, attach anothe ver every question. | | | | | | |
| 1. | Is this a joint case | 9? | | | | | | | |
| 2. 3. | Do you have deperate Do not list Debtor 1 Debtor 2. Do not state the denames. Do your expenses expenses of peopyourself and your | ebtor 2 live in a sep Debtor 2 must file endents? and Debtor 2 must file endents? include le other than dependents? | Official Form 106J-: No Yes. Fill out this info for each dependent. No No Yes Fill out this info Yes Yes | ormation | Dependent's relation Debtor 1 or Debtor | onshij | | Dependent's age | Does dependent live with you? No Yes Yes Yes |
| to | timate your expense report expenses as a form and fill in the | of a date after the l | | - | - | | - | - | |
| Inc | clude expenses paid ch assistance and h | for with non-cash | - | - | | | | Your expens | ses |
| 4. | | | nses for your reside ny rent for the groun | | | | 4 | 1 | \$3,331.28 |
| | If not included in I | ine 4: | | | | | | | |
| | 4a. Real estate ta | xes | | | | | 4 | ła | |
| | 4b. Property, hom | eowner's, or renter's | s insurance | | | | 4 | 1b | |
| | 4c. Home mainter | nance, repair, and u | pkeep expenses | | | | 4 | łc | \$250.00 |
| | 4d Homeowner's | association or cond | lominium dues | | | | , | 1d | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 40 of 69

| Deb | otor 1 Steven Joseph Dombrovsky | Case number (if known) | _ |
|-----|---|------------------------|------------|
| | | Your expens | ses |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | \$4,650.00 |
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$250.00 |
| | 6b. Water, sewer, garbage collection | 6b | |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c | \$268.00 |
| | 6d. Other. Specify: | 6d. | |
| 7. | Food and housekeeping supplies | 7. | \$500.00 |
| 8. | Childcare and children's education costs | 8. | |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$50.00 |
| 10. | Personal care products and services | 10. | \$50.00 |
| 11. | Medical and dental expenses | 11. | \$100.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$325.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$50.00 |
| 14. | Charitable contributions and religious donations | 14. | \$0.00 |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | |
| | 15b. Health insurance | 15b. | \$826.00 |
| | 15c. Vehicle insurance | 15c. | \$250.00 |
| | 15d. Other insurance. Specify: | 15d. | |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16 | |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a | |
| | 17b. Car payments for Vehicle 2 | 17b. | |
| | 17c. Other. Specify: Pet food and care | 17c. | \$50.00 |
| | 17d. Other. Specify: | 17d. | |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19. | Other payments you make to support others who do not live with you. Specify: | 19. | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 41 of 69

| Deb | tor 1 | Steven Joseph Dombrovsky | Case number (if known) | |
|-----|-------|---|------------------------|-------------|
| 20. | | r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a | \$693.31 |
| | 20b. | Real estate taxes | 20b | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d | \$50.00 |
| | 20e. | Homeowner's association or condominium dues | 20e | \$174.00 |
| 21. | Othe | r. Specify: | 21. + | |
| 22. | Calcu | ulate your monthly expenses. | | |
| | 22a. | Add lines 4 through 21. | 22a | \$11,867.59 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106 | SJ-2. 22b | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c | \$11,867.59 |
| 23. | Calcu | ulate your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a | \$16,381.06 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. – | \$11,867.59 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c | \$4,513.47 |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after | you file this form? | |
| | | xample, do you expect to finish paying for your car loan within the year or do lent to increase or decrease because of a modification to the terms of your modification. | , , , | |
| | | No. | | |
| | | Yes. Explain here: None. | | |
| | | | | |
| | | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc

| | | Main | Document Pag | je 42 of 69 |
|--|----------------------|------------------------------|--|---|
| Fill in this inf | ormation to i | dentify your case | | |
| Debtor 1 | Steven First Name | Joseph Middle Name | Dombrovsky Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ |
| United States Ba | nkruptcy Court fo | r the: CENTRAL DIS | T. OF CALIFORNIA | |
| Case number (if known) | | | | Check if this is an amended filing |
| Official Form | 106Dec | | | |
| Declaration | About an I | ndividual Debt | or's Schedules | 12/15 |
| concealing proper \$250,000, or impri | rty, or obtaining | money or property by | / fraud in connection with 18 U.S.C. §§ 152, 1341, 15 | edules. Making a false statement, a bankruptcy case can result in fines up to 19, and 3571. |
| Did you pay o | or agree to pay s | omeone who is NOT | an attorney to help you fil | out bankruptcy forms? |
| ⊘ No | | | | |
| Yes. Na | ame of person | | | Attach Bonkminton Polition Branco de Aletina |
| | | | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Date

MM / DD / YYYY

Date 11/20/2017 MM / DD / YYYY

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 43 of 69

| F | ill in this inf | ormation to iden | itify you | r case: | r age 40 or | 00 | | | |
|----------|---|--|----------------------|--|--|--------|--|--|--|
| D | ebtor 1 | Steven First Name | Joseph Middle Nar | | rsky | | | | |
| | ebtor 2 Spouse, if filing) | First Name | Middle Nar | ne Last Name | | | | | |
| | | | | AL DIST. OF CALIFO | DRNIA | | | | |
| С | ase number | | | AL DIOT, OF OALII C | MIA | | | 100 M (2) 200000 | |
| (if | known) | | | | | | Check if thi amended fi | | |
| | ficial Form | | | | | | | | |
| | | | | r Individuals F | | | | 04/16 | |
| cor | Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. | | | | | | | | |
| P | art 1: Giv | e Details About | Your Ma | rital Status and W | here You Lived B | efo | re | | |
| 1. | What is your of Married ☐ Not marrie | current marital statu | s? | | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | | |
| 3. | | | | | | | | | |
| | ☐ No ☑ Yes. Make | e sure you fill out Sch | edule H: Y | our Codebtors (Official | Form 106H). | | | | |
| Pa | art 2: Exp | lain the Sources | of Your | Income | | | | | |
| 4. | Fill in the total | amount of income you | u received | or from operating a be from all jobs and all bus ne that you receive tog | sinesses, including par | rt-tim | or the two previous calc e activities. Debtor 1. | endar years? | |
| | ☐ No ☑ Yes. Fill in | the details. | | | | | | | |
| | | | D | ebtor 1 | | D | ebtor 2 | | |
| . | Debte 1 Ford | Mazda | | urces of income eck all that apply. | Gross income (before deductions and exclusions | | urces of income eck all that apply. | Gross income (before deductions and exclusions | |
| | n January 1 of date you filed fo | the current year unt or bankruptcy: | il 🗹 | Wages, commissions, bonuses, tips | \$55,137.00 | | Wages, commissions, bonuses, tips | | |
| | | 20.00 | | Operating a business | | | Operating a business | | |
| ort | the last calenda | ar year: | V | Wages, commissions, | \$10,000.00 | | Wages, commissions, | | |
| Jan | uary 1 to Decem | nber 31, | | bonuses, tips Operating a business | | | bonuses, tips Operating a business | | |
| or 1 | the calendar ye | ar before that: | | Wages, commissions, | | | Wages, commissions, | 200000000000000000000000000000000000000 | |
| Jani | uary 1 to Decem | nber 31, <u>2015</u>) | | bonuses, tips Operating a business | - | | bonuses, tips Operating a business | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 44 of 69

| D | ebtor 1 Steven Joseph Dombrovsky | Case number (if known) | | | | | | | |
|-----|--|--|--|--|--|--|--|--|--|
| | | Debtor 1 | | Debtor 2 | | | | | |
| Nul | DEBTON GROUP | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions | | | | |
| F | rom January 1 of the current year until e date you filed for bankruptcy: | Wages, commissions, bonuses, tips | - | Wages, commissions, bonuses, tips | | | | | |
| | | Operating a business | | Operating a business | | | | | |
| | or the last calendar year: | Wages, commissions, bonuses, tips | \$80,222.16 | Wages, commissions, bonuses, tips | | | | | |
| (J | anuary 1 to December 31, 2016) | Operating a business | | Operating a business | | | | | |
| Fo | or the calendar year before that: | Wages, commissions, | \$94,577.00 | Wages, commissions, | | | | | |
| (J | anuary 1 to December 31, 2015) | bonuses, tips Operating a business | | bonuses, tips Operating a business | | | | | |
| | | Debtor 1 | | Debtor 2 | | | | | |
| NAR | Spouse Sengineering | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions | | | | |
| | om January 1 of the current year until e date you filed for bankruptcy: | Wages, commissions, bonuses, tips | \$43,318.98 | Wages, commissions, bonuses, tips | | | | | |
| | | Operating a business | | Operating a business | | | | | |
| | or the last calendar year: | Wages, commissions, bonuses, tips | \$49,768.10 | Wages, commissions, bonuses, tips | - | | | | |
| (38 | anuary 1 to December 31, 2016) | Operating a business | | Operating a business | | | | | |
| | r the calendar year before that: | Wages, commissions, bonuses, tips | \$51,072.00 | Wages, commissions, bonuses, tips | · · | | | | |
| (Ja | anuary 1 to December 31, 2015) | Operating a business | | Operating a business | | | | | |
| 5. | | | | | | | | | |
| | List each source and the gross income from | n each source separately. [| Do not include income | that you listed in line 4. | | | | | |
| | No✓ Yes. Fill in the details. | | | | | | | | |
| | | Debtor 1 | | Debtor 2 | | | | | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | | | | |
| Fre | om January 1 of the current year until | Rental Income-Feliz | \$6,650.00 | | | | | | |
| | date you filed for bankruptcy: | Rental Income-Ancho | \$6,825.00 | | | | | | |
| | Consideration of the Constitution of the Const | Rental Income-Residen | | | | | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 45 of 69

| Debtor 1 | Steven Joseph Dombrovsky | | | Case number (if knov | vn) |
|-----------------------------|-------------------------------------|--|------------------------|--------------------------|-----------------------------|
| F (1. • | t salar laran | Rental Income-Fel | liz \$8.0 | 975.00 | |
| | t calendar year: | Rental Income-An | | 700.00 | |
| (January 1 | to December 31, 2016) | Dividends | <u> </u> | \$3.00 | |
| | 1111 | Unemployment | | 50.00 | |
| | | <u></u> | | | |
| For the cal | endar year before that: | Rental Income-Fel | liz \$10,2 | 255.00 | |
| | to December 31, 2015) | Rental Income-An | cho \$8,9 | 57.00 | |
| (carraar) . | YYYY / | Tax Refund-State | | 500.00 | |
| | | Interest | | \$4.00 | |
| D1 0- | List Cartain Barrer anta V | Mada Dafasa V | an Filad to De | | |
| Part 3: | List Certain Payments Yo | ou Made Before Y | ou Filed for Ba | nkruptcy | |
| 6. Are ei | ther Debtor 1's or Debtor 2's debts | s primarily consumer | debts? | | |
| □ No | o. Neither Debtor 1 nor Debtor 2 | hae primarily concur | mer dehte Consum | ner debts are defined | Lin 11 I I S C & 101(8) as |
| □ ''' | "incurred by an individual prima | | | | 7 III 11 0.0.0. § 101(0) as |
| | During the 90 days before you f | iled for bankruptcy, did | l you pay any credito | or a total of \$6,425* o | or more? |
| | No. Go to line 7. | | | | |
| | _ | | | _ | |
| | , , | or to whom you paid a t that creditor. Do not in ony. Also, do not inclu | clude payments for | domestic support ob | ligations, such as |
| | * Subject to adjustment on 4/01 | • | | · | |
| | | | | | |
| ✓ Ye | es. Debtor 1 or Debtor 2 or both h | • | | | |
| | During the 90 days before you f | iled for bankruptcy, did | d you pay any credite | or a total of \$600 or r | nore? |
| | ☐ No. Go to line 7. | | | | |
| | _ | | | | |
| | | or to whom you paid a t de payments for domes ayments to an attorney | stic support obligatio | ns, such as child su | |
| | | Dates of | Total amount | Amount you | Was this payment for |
| | | payment | paid | still owe | |
| CitiMortg Creditor's nar | <u> </u> | | \$9,993.84 | \$513,437.00 | Mortgage |
| POBox 78 | | 11/14/2017 | | | Car |
| | treet | 10/14/2017 | | | Credit card |
| | | 09/14/2017 | | | Loan repayment |
| Dhaaniy | A7 95062 | 904 <i>E</i> | | | Suppliers or vendors |
| Phoenix City | AZ 85062 State ZIP Cod | | | | Other |
| - , | | Detec of | Total amazint | A | Mag this payment for |
| | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| Seterus | | | \$2,250.00 | \$118,632.00 | ✓ Mortgage |
| Creditor's nar | me | 11/14/2017 | | | Car |
| POBox 10 | | 10/14/2017 | | | Credit card |
| Number S | treet | 09/14/2017 | | | Loan repayment |
| | | | | | Suppliers or vendors |
| Hartford | CT 06143 | -1077 | | | Other |
| City. | State 7ID Cod | | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 46 of 69

| | | | | | Case number (if kno | |
|--|---|---|-------------------|---|---|--|
| | | | ates of syment | Total amount paid | Amount you still owe | Was this payment for |
| os Angeles De | epartment Of Wat | er & Power | - | \$1,660.00 | \$0.00 | ☐ Mortgage |
| reditor's name | | | /15/2017 | | | — |
| OBox 30808 umber Street | | 09 | /15/2017 | | | ☐ Credit card |
| umber Officer | | | | | | Loan repayment |
| | | | | | | Suppliers or vendors |
| os Angeles ity | CA State | 90030 ZIP Code | | | | ✓ Other <u>Utilities</u> |
| Insiders inclu corporations agent, includi | ide your relatives; ar of which you are an | ny general partners; re officer, director, perso ss you operate as a so | elatives of a | iny general partner l, or owner of 20% | rs; partnerships of vor more of their vot | e who was an insider? which you are a general partner; ing securities; and any managing ts for domestic support obligations |
| ✓ No ☐ Yes. List | t all payments to an i | insider. | | | | |
| Within 1 yea benefited an | • | or bankruptcy, did yo | ou make ar | y payments or tra | ansfer any propert | y on account of a debt that |
| Include paym | ents on debts guara | nteed or cosigned by | an insider. | | | |
| | t all payments that be | enefited an insider. ions, Repossess | ions and | 1 Foroclosuros | | |
| Within 1 yea List all such r modifications | r before you filed fo | or bankruptcy, were | you a party | / in any lawsuit, c | ourt action, or adı | ministrative proceeding? ternity actions, support or custody |
| □ No ☑ Yes. Fill | in the details. | | | | | |
| ase title | | Nature of the case | • | Court | t or agency | Status of the case |
| teven Dombro | vsky v. SLS | Complaint to enj | join forecl | | Angeles County | Superior Court Pending |
| lortgage | | sale | | Court | Name | _ |
| | | | | Numbe | er Street | On appe |
| ase number | | - | | | | Conclud |
| | | | | City | | State ZIP Code |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 47 of 69

| Deb | otor 1 | Steven Joseph Dombrovsky | Case number | er (if known) | | | |
|--|---------------|---|---|------------------------------|-------------|--|--|
| 10. | seized, | 1 year before you filed for bankruptcy, was an or levied? all that apply and fill in the details below. | ny of your property repossessed, fore | closed, garnished, attac | hed, | | |
| | | Go to line 11. s. Fill in the information below. | | | | | |
| 11. | | 90 days before you filed for bankruptcy, did a ts from your accounts or refuse to make a pa | | cial institution, set off ar | ny | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | |
| 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? | | | | | | | |
| | ✓ No ☐ Yes | | | | | | |
| Р | art 5: | List Certain Gifts and Contribution | S | | | | |
| | | 2 years before you filed for bankruptcy, did y | | nore than \$600 per pers | on? | | |
| | ☑ No | s. Fill in the details for each gift. | | | | | |
| 14. | | 2 years before you filed for bankruptcy, did y charity? | ou give any gifts or contributions with | a total value of more th | an \$600 | | |
| | □ No ☑ Yes | s. Fill in the details for each gift or contribution. | | | | | |
| | | tributions to charities | Describe what you contributed | Date you contributed | Value | | |
| Go | | ore than \$600 Industries And Others | Cash/money/funds and personal possessions | 2016 | \$1,410.00 | | |
| Num | nber Str | eet | | 2015 | \$2,912.00 | | |
| | | | | | | | |
| City | | State ZIP Code | | | | | |
| Р | art 6: | List Certain Losses | | | | | |
| 15. | | 1 year before you filed for bankruptcy or sinc isaster, or gambling? | e you filed for bankruptcy, did you los | e anything because of t | heft, fire, | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 48 of 69

| Debtor 1 Steven Joseph Dombrovsky | | | oseph D | ombrovsky | Case number (if known) | | | | |
|-----------------------------------|---------------------------|------------------------------|----------------------|-----------------------|---|------------------------|---|-------------------|--|
| Pa | art 7: | List Ce | rtain Pa | ayments or | Transfers | | | | |
| 16. | anyone | you consu | ilted abo | ut seeking ba | ptcy, did you or anyone else acting nkruptcy or preparing a bankruptcy preparers, or credit counseling agencies | petition? | | | |
| | □ No ✓ Yes | s. Fill in the | details. | | | | | | |
| | v Office | es Of Hage Vas Paid | n & Hag | jen | Description and value of any prop Cash/money/funds | perty transferred | Date payment or transfer was made | Amount of payment | |
| | 9 San E ber Str | Blas Avenu reet | ue | | _ | | 07/27/2017 | \$1,000.00 | |
| City jeff | | Hills nhagenlav ite address | CA State | 91364 ZIP Code | - | | | | |
| | | Made the Paym | , | | _ | | | | |
| 17. | Do not | e who prom include any | ised to h payment | elp you deal v | ptcy, did you or anyone else acting with your creditors or to make paym t you listed on line 16. | | | perty to | |
| 18. | | • | - | | ruptcy, did you sell, trade, or otherw rse of your business or financial aff | | operty to anyone, ot | her than | |
| | | - | | | s made as security (such as granting chave already listed on this statement. | of a security interest | or mortgage on your | property). | |
| | ✓ No ☐ Yes | s. Fill in the | details. | | | | | | |
| 19. | you are | e a benefici | ary? (⊺ | | cruptcy, did you transfer any proper n called asset-protection devices.) | ty to a self-settled t | rust or similar devic | e of which | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 49 of 69

| Deb | tor 1 | Steven Joseph Dombrovs | sky | Case number (if known) | |
|-------------|---------------------------|---|---|--|---------------|
| P | art 8: | List Certain Financial | Accounts, Instruments, Safe | Deposit Boxes, and Storage Units | |
| 20. | | 1 year before you filed for bar , closed, sold, moved, or tran | | nts or instruments held in your name, or for | your |
| | | | ket, or other financial accounts; certif associations, and other financial insti | cates of deposit; shares in banks, credit union utions. | is, brokerage |
| | ✓ No ☐ Yes | s. Fill in the details. | | | |
| 21. | - | now have, or did you have w urities, cash, or other valuabl | • | kruptcy, any safe deposit box or other depo | ository |
| | ✓ No | s. Fill in the details. | | | |
| 22. | ☑ No | ou stored property in a storages. Fill in the details. | ge unit or place other than your hor | ne within 1 year before you filed for bankru | ptcy? |
| P | art 9: | Identify Property You | Hold or Control for Someon | e Else | |
| 23. | • | hold or control any property in trust for someone. | that someone else owns? Include | any property you borrowed from, are storing | ıg for, |
| | □ No ☑ Yes | s. Fill in the details. | | | |
| | | | Where is the property? | Describe the property | Value |
| Own | er's Name | | | Note: Debtor Dombrovsky's daughter rents two rooms in | |
| 430 Num | 0 Gayle ber Str | | At residence Number Street | Debtor Domborvsky's residence. Some of the personal possessions at the residence are therefore hers. | |
| Tar City | zana | CA 91356 State ZIP Code | - City State ZIP Ci | ode | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 50 of 69

| Deb | otor 1 | Steven Joseph Dombrovsky | Case number (if known) |
|-----|----------------|---|--|
| Р | art 10: | Give Details About Environmental Information | |
| For | the purp | oose of Part 10, the following definitions apply: | |
| | hazardoı | nental law means any federal, state, or local statute or regulation cor is or toxic substance, wastes, or material into the air, land, soil, surfa is statutes or regulations controlling the cleanup of these substances, | ace water, groundwater, or other medium, |
| | | ns any location, facility, or property as defined under any environme or used to own, operate, or utilize it, including disposal sites. | ntal law, whether you now own, operate, or |
| | | us material means anything an environmental law defines as a hazar e, hazardous material, pollutant, contaminant, or similar item. | dous waste, hazardous substance, toxic |
| Rep | oort all n | otices, releases, and proceedings that you know about, regardless of | when they occurred. |
| 24. | Has an | y governmental unit notified you that you may be liable or potentially | liable under or in violation of an environmental |
| | ☑ No □ Yes | s. Fill in the details. | |
| 25. | ☑ No | ou notified any governmental unit of any release of hazardous materia. 5. Fill in the details. | al? |
| 26. | _ | ou been a party in any judicial or administrative proceeding under an | y environmental law? Include settlements and |
| | ✓ No | s. Fill in the details. | |
| P | art 11: | Give Details About Your Business or Connections to A | Any Business |
| 27. | Within busines | 4 years before you filed for bankruptcy, did you own a business or hass? | ave any of the following connections to any |
| | | A sole proprietor or self-employed in a trade, profession, or other activity. A member of a limited liability company (LLC) or limited liability partners. A partner in a partnership. An officer, director, or managing executive of a corporation. An owner of at least 5% of the voting or equity securities of a corporation. | hip (LLP) |
| | | None of the above applies. Go to Part 12. Check all that apply above and fill in the details below for each busines | s. |
| 28. | | 2 years before you filed for bankruptcy, did you give a financial state ncial institutions, creditors, or other parties. | ment to anyone about your business? Include |
| | □ No | s. Fill in the details below. | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 51 of 69

| Debtor 1 | Steven Joseph Dombrovsky | Case number (if known) |
|-------------------------|--|---|
| Part 12: | Sign Below | |
| property by or both. 18 | sare true and correct. I understand that | ial Affairs and any attachments, and I declare under penalty of perjury making a false statement, concealing property, or obtaining money or ase can result in fines up to \$250,000, or imprisonment for up to 20 years, X Signature of Debtor 2 |
| Date | 11/20/2017 | Date Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| ✓ No ☐ Yes | on administration pages to real statement of | Themeles Analis for Individuals Filling for Bankruptcy (Official Form 107)? |
| Did you pay | or agree to pay someone who is not an | attorney to help you fill out bankruptcy forms? |
| ✓ No ☐ Yes. Na | me of person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 52 of 69

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA SAN FERNANDO VALLEY DIVISION

| In r | re Steven Joseph Dombrovsky | Case No. |
|------|--|---|
| | | Chapter <u>13</u> |
| | DISCLOSURE OF COMPENSATION OF | F ATTORNEY FOR DEBTOR |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in conis as follows: | petition in bankruptcy, or agreed to be paid to me, for |
| | For legal services, I have agreed to accept | \$5,000.00 |
| | Prior to the filing of this statement I have received | |
| | Balance Due | \$4,000.00 |
| 2. | The source of the compensation paid to me was: | |
| | ✓ Debtor ☐ Other (specify) | |
| 3. | The source of compensation to be paid to me is: | |
| | ☐ Debtor ☑ Other (specify) Through the Chapter 13 pla | ın |
| 4. | ☑ I have not agreed to share the above-disclosed compensation wassociates of my law firm. | vith any other person unless they are members and |
| | ☐ I have agreed to share the above-disclosed compensation with a associates of my law firm. A copy of the agreement, together with compensation, is attached. | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal se | ervice for all aspects of the bankruptcy case, including: |
| | a. Analysis of the debtor's financial situation, and rendering advice to bankruptcy; | o the debtor in determining whether to file a petition in |
| | b. Preparation and filing of any petition, schedules, statements of aff | airs and plan which may be required; |
| | c. Representation of the debtor at the meeting of creditors and confi | rmation hearing, and any adjourned hearings thereof: |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 53 of 69

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

I certify that the foregoing is a complete statement of any agreement of arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

11/20/2017

Date

Bar No. 143754

Jeffrey J Hagen Law Offices Of Hagen & Hagen 4559 San Blas Avenue

Woodland Hills, California 91364

Phone: (818) 501-6161 / Fax: (818) 907-6722

Steven Joseph Dombrovsky

| Fill in this i | information to ide | entify your case | : | Check as | directed in lines 17 and | 21: |
|---|--|---|---|---|---|--------|
| Debtor 1 | Steven | Joseph | Dombrovsky | According to | the calculations required by this | S |
| Deptor 1 | First Name | Middle Name | Last Name | — Statement: | , | |
| Debtor 2 | | | | 1. Disposa | ble income is not determined | |
| (Spouse, if filir | ng) First Name | Middle Name | Last Name | — under 1 | 1 U.S.C. § 1325(b)(3). | |
| United States | Bankruptcy Court for t | he: CENTRAL DIS | ST. OF CALIFORNIA | | ble income is determined 1 U.S.C. § 1325(b)(3). | |
| Case number | | | | 3. The cor | nmitment period is 3 years. | |
| (if known) | | | | — | nmitment period is 5 years. | |
| Official For | rm 122C-1 | | | Check if t | his is an amended filing | |
| Chapter 1 | 3 Statement o | | nt Monthly Income | • | | |
| and Calcu | lation of Com | <u>mitment Peri</u> | od | | | 12/1 |
| | Calculate Your Av | | | | | |
| • | our marital and filing | | only. | | | |
| ☐ Not m | narried. Fill out Colum | nn A, lines 2-11. | | | | |
| ✓ Marrie | ed. Fill out both Colur | mns A and B, lines 2 | -11. | | | |
| bankruptc August 31. in the resul | y case. 11 U.S.C. § If the amount of your It. Do not include any | 101(10A). For exam monthly income var income amount mor | ied during the 6 months, add | ember 15, the 6-mon d the income for all 6 f both spouses own t | th period would be March 1 thro months and divide the total by he same rental property, put the | 6. Fil |
| | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| _ | s wages, salary, tips payroll deductions). | , bonuses, overtime | e, and commissions | \$5,510.40 | \$4,572.00 | |
| 3. Alimony a | nd maintenance payı | ments. Do not inclu | de payments from a spouse | \$0.00 | \$0.00 | |
| expenses regular cor your depen | | ndents, including ch married partner, mem commates. Do not in | nild support. Include hbers of your household, aclude payments from a | \$0.00 | <u>\$0.00</u> | |
| 5. Net incom | e from operating a b | usiness, professior | , or farm | | | |
| | | Debtor 1 | Debtor 2 | | | |
| Gross rece | eipts (before all | \$0.00 | \$0.00 | | | |
| | nd necessary operatin | g – \$0.00 | _ \$0.00 Copy | | | |
| Net monthl profession, | ly income from a busir | ness, \$0.00 | | →\$0.00 | \$0.00 | |

| Deb | tor 1 | Steven Joseph Dombro | vsky | | (| Case number (if k | nown) | |
|-----|------------------------|--|---|---|--------------|--------------------|---|------------------------------|
| | | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| 6. | Net | income from rental and other i | eal property | | | | | |
| | | | Debtor 1 | Debtor 2 | | | | |
| | | ss receipts (before all uctions) | \$3,125.00 | \$0.00 | | | | |
| | | nary and necessary operating - | \$0.00 | \$0.00 | Сору | | | |
| | | monthly income from rental or real property | \$3,125.00 | | here → | \$3,125.00 | \$0.00 | |
| 7. | | rest, dividends, and royalties | See continuati | on page(s) for d | letalis | \$0.00 | \$0.00 | |
| 8. | Une | mployment compensation | | | | \$0.00 | \$0.00 | |
| | Do r | not enter the amount if you conte efit under the Social Security Act | | | | | | |
| | F | or you | | \$0.0 | 00 | | | |
| | F | or your spouse | | \$0.0 | 00_ | | | |
| 9. | | sion or retirement income. Do a benefit under the Social Secu | • | nount received that | | \$0.00 | \$0.00 | |
| 11. | or pa or in sepa | unt. Do not include any benefits ayments received as a victim of ternational or domestic terrorism arate page and put the total below. Il amounts from separate pages, culate your total average monti | a war crime, a crim If necessary, list w. if any. | e against humanity | ', | | + | |
| P | | lines 2 through 10 for each colund add the total for Column A to the Determine How to M | ne total for Column | | n Incom | \$8,635.40 | + \$4,572.00 | Total average monthly income |
| | | | | | | | | \$13,207.40 |
| | | y your total average monthly i | | 1 | | | | 913,207.40 |
| 13. | | You are not married. Fill in 0 be You are married and your spous You are married and your spous Fill in the amount of the income of you or your dependents, such than you or your dependents. Below, specify the basis for exceeding the same of this adjustment does not apply the same of the same o | elow. se is filing with you. se is not filing with y listed in line 11, Co n as payment of the lluding this income ments on a separat | you. olumn B, that was I e spouse's tax liabil and the amount of | ity or the s | spouse's support o | of someone other | |
| | | Total | | | | \$0.00 Cop | y here 👈 | \$0.00 |
| 14. | You | r current monthly income. Su | btract the total in lin | ne 13 from line 12. | | | | \$13,207.40 |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 56 of 69

| Deb | otor 1 | Steven Joseph Dombrovsky | Case number (if known) | | |
|-----|--------|--|---|-------|----------|
| 15. | Calc | ulate your current monthly income for the year. | Follow these steps: | | |
| | 15a. | Copy line 14 here 😝 | | \$1 | 3,207.40 |
| | | Multiply line 15a by 12 (the number of months in a | year). | X | 12 |
| | 15b. | The result is your current monthly income for the y | rear for this part of the form. | \$158 | 8,488.80 |
| 16. | Calc | ulate the median family income that applies to yo | ou. Follow these steps: | | _ |
| | 16a. | Fill in the state in which you live. | California | | |
| | 16b. | Fill in the number of people in your household. | 2 | | |
| | 16c. | , , | size of households, go online using the link specified in the separate ailable at the bankruptcy clerk's office. | \$70 | 0,245.00 |
| 17. | How | do the lines compare? | | | |
| | 17a. | · | n the top of page 1 of this form, check box 1, <i>Disposable income i</i> . Do NOT fill out Calculation of Your Disposable Income (Official Fo | | |
| | 17b. | <u>·</u> | f page 1 of this form, check box 2, <i>Disposable income is determin</i> out Calculation of Your Disposable Income (Official Form 122 nthly income from line 14 above. | | • |
| D | art 3: | Calculate Your Commitment Period | Under 11 U.S.C. & 1325(b)(4) | | |
| | art O. | Calculate 10th Commitment 1 criot | | • | |
| 18. | Copy | your total average monthly income from line 11 | | \$1; | 3,207.40 |
| 19. | that | • | married, your spouse is not filing with you, and you contend § 1325(b)(4) allows you to deduct part of your spouse's | | |
| | 19a. | If the marital adjustment does not apply, fill in 0 or | n line 19a | | \$0.00 |
| | 19b. | Subtract line 19a from line 18. | | \$13 | 3,207.40 |
| 20. | Calc | ulate your current monthly income for the year. | Follow these steps: | | |
| | 20a. | Copy line 19b | | \$1; | 3,207.40 |
| | | Multiply by 12 (the number of months in a year). | | X | 12 |
| | 20b. | The result is your current monthly income for the y | rear for this part of the form. | \$158 | 8,488.80 |
| | 20c. | Copy the median family income for your state and | size of household from line 16c. | \$70 | 0,245.00 |
| 21. | How | do the lines compare? | | | |
| | ш | Line 20b is less than line 20c. Unless otherwise ord check box 3, <i>The commitment period is 3 years</i> . Go | | | |
| | | Line 20b is more than or equal to line 20c. Unless of this form, check box 4, <i>The commitment period is</i> | · · · · | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 57 of 69

| Debtor 1 | Steven Joseph Dombrovsky | Case number (if known) |
|----------|---------------------------------|---|
| Part 4: | sign Below | |
| x _ | | e information on this statement and in any attachments is true and correct. |
| Ste | en Joseph Dombrovsky, Debtor 1 | Signature of Debtor 2 |
| Da | te 1 /20/2017 MM / DD / YYYY | Date |

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 58 of 69

| Debtor 1 Steven Joseph Domi | provsky Case | e number (if known) |
|--|----------------------------------|---------------------------------------|
| 6. Net income from rental an | d other real property (details): | |
| Debtor 1 / Debtor 2 | Description (if available) | Average Monthly Amount |
| Debtor 1 Gross receipts (before all deduction Ordinary and necessary operating Net monthly income from rental or | expenses | <u>\$950.00</u> \$0.00 \$950.00 |
| Debtor 1 Gross receipts (before all deduction Ordinary and necessary operating Net monthly income from rental or | expenses | \$975.00 \$0.00 \$975.00 |
| <u>Debtor 1</u> Gross receipts (before all deduction Ordinary and necessary operating | , | \$1,200.00 \$0.00 |

Net monthly income from rental or other real property

\$1,200.00

| Fill in this inf | ormation to | identify your case | : |
|---------------------------------|----------------------|------------------------------|--------------------------------|
| Debtor 1 | Steven First Name | Joseph Middle Name | Dombrovsky Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Ba | nkruptcy Court fo | or the: CENTRAL DIS | T. OF CALIFORNIA |
| Case number (if known) | | | |

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

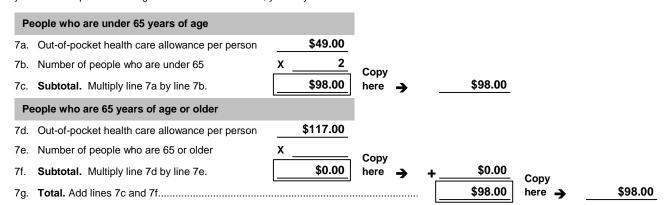
Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$1,132.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.



Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 60 of 69

| Debto | r 1 | Steven Jos | seph Dombrovsky | | Case number (if known) | |
|-------|------------|--|--|----------------------------------|---|----------|
| Loca | al Sta | andards | You must use the IRS Local Sta | andards to answer the ques | tions in lines 8-15. | |
| | | | from the IRS, the U.S. Trustee Pres into two parts: | ogram has divided the IR | S Local Standard for housing | |
| | | _ | s Insurance and operating exp s Mortgage or rent expenses | enses | | |
| the | ink s | | ns in lines 8-9, use the U.S. Trus e separate instructions for this foce. | | | |
| 8. | | | ies Insurance and operating expount listed for your county for insura | | | \$561.00 |
| 9. | Hou | sing and utiliti | ies Mortgage or rent expenses | : | | |
| | 9a. | - | nber of people you entered in line 5 y for mortgage or rent expenses. | 5, fill in the dollar amount lis | sted \$1,979.00 | |
| | 9b. | Total average your home. | monthly payment for all mortgages | s and other debts secured l | ру | |
| | | contractually of | ne total average monthly payment, due to each secured creditor in the lext divide by 60. | | r | |
| | | Name of the | creditor | Average monthly payment | | |
| | | CitiMortgag | e, Inc. | \$3,331.28 | | |
| | | Seterus | | \$693.31 | | |
| | | SLS Mortga | ge | + \$4,650.00 | | |
| | | 9b. Total aver | rage monthly payment | \$8,674.59 Copy | to oza so amount on | |
| | 9c. | Net mortgage | or rent expense. | | | |
| | | | b (total average monthly payment). If this number is less than \$0, en | | \$0.00 Copy | \$0.00 |
| 10. | - | | ne U.S. Trustee Program's division | | | |
| | Exp why | | | | | |
| 11. | Loc | al transportation O. Go to line 1 1. Go to line 1 2 or more. Go | 14. 12. | of vehicles for which you c | laim an ownership or operating expense. | |
| 12. | | • | expense: Using the IRS Local Stans, fill in the Operating Costs that ap | | • | \$300.00 |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 61 of 69

| | Steve | n Joseph Dombrovsky | Case numbe | er (if known) | |
|--------------|----------------------------------|---|--|---|--------|
| expe | nse for e | ership or lease expense: Using the IRS ach vehicle below. You may not claim the addition, you may not claim the expens | e expense if you do not make any loan o | | |
| Vehic | cle 1 | Describe Vehicle 1: | | | |
| 13a. | Ownersh | ip or leasing costs using IRS Local Stand | dard | | |
| 13b. | Average | monthly payment for all debts secured by | y Vehicle 1. | | |
| | Do not in | clude costs for leased vehicles. | | | |
| | amounts | ate the average monthly payment here a that are contractually due to each secure file for bankruptcy. Then divide by 60. | | | |
| | Name (| of each creditor for Vehicle 1 | Average monthly payment | | |
| | | | | | |
| | | | + | December 1 | |
| | | Total average monthly payment | Copy here → - | Repeat this amount on line 33b. | |
| | | cle 1 ownership or lease expense. | less than \$0, enter \$0 | Copy net Vehicle 1 expense here | |
| | Subtract | line 13b from line 13a. If this number is | 1033 triair \$0, critci \$0. | I II EI E 📥 | \$0.0 |
| | cle 2 | Describe Vehicle 2: | | nere 🗲 | \$0.0 |
| Vehic | cle 2 | Describe Vehicle 2: | | | \$0.00 |
| Vehice | cle 2 Ownersh | Describe Vehicle 2: ip or leasing costs using IRS Local Stand | dard | | \$0.00 |
| 13d. 13e. | Cle 2 Ownersh Average | Describe Vehicle 2: | dard | | \$0.00 |
| 13d. 13e. | Ownersh Average costs for | Describe Vehicle 2: ip or leasing costs using IRS Local Stand monthly payment for all debts secured by | dard | | \$0.0 |
| 13d. 13e. | Ownersh Average costs for | Describe Vehicle 2: ip or leasing costs using IRS Local Stand monthly payment for all debts secured by leased vehicles. | dard | | \$0.0 |
| 13d. 13e. | Ownersh Average costs for | Describe Vehicle 2: ip or leasing costs using IRS Local Stand monthly payment for all debts secured by leased vehicles. | dardy Vehicle 2. Do not include Average monthly | Repeat this amount on line 33c. | \$0.00 |
| 13d. 13e. | Ownersh Average costs for | Describe Vehicle 2: ip or leasing costs using IRS Local Stand monthly payment for all debts secured by leased vehicles. of each creditor for Vehicle 2 Total average monthly payment | dard | Repeat this amount on | \$0.00 |
| 13d. 13e. | Ownersh Average costs for Name (| Describe Vehicle 2: ip or leasing costs using IRS Local Stand monthly payment for all debts secured by leased vehicles. of each creditor for Vehicle 2 | dard | Repeat this amount on line 33c. Copy net | \$0.00 |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 62 of 69

| Debto | Steven Joseph Dombrovsky | Case number (if known) | | | | | |
|-------|--|---|--------|--|--|--|--|
| 15. | 5. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation. | | | | | | |
| Oth | Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. | | | | | | |
| 16. | 6. Taxes: The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. | | | | | | |
| 17. | 7. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. | | | | | | |
| 18. | 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. | | | | | | |
| 19. | 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. | | | | | | |
| 20. | D. Education: The total monthly amount that you pay for education that is either required: ■ as a condition for your job, or ■ for your physically or mentally challenged dependent child if no public education is available for similar services. | | | | | | |
| 21. | 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. | | | | | | |
| 22. | 2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. | | | | | | |
| 23. | \$0.00 Soptional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. | | | | | | |
| 24. | 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23. | | | | | | |
| Add | Additional Expense Deductions These are additional deductions allowed by the Means Test. | | | | | | |
| 25 | | ude any expense allowances listed in lines 6-24. savings account expenses. The monthly expenses for health | | | | | |
| 23. | · · · · · · · · · · · · · · · · · · · | ccounts that are reasonably necessary for yourself, your | | | | | |
| | Health insurance | \$0.00 | | | | | |
| | Disability insurance | \$0.00 | | | | | |
| | Health savings account + | \$0.00 | | | | | |
| | Total | \$0.00 Copy total here | \$0.00 | | | | |
| | Do you actually spend this total amount? | | | | | | |
| | No. How much do you actually spend?✓ Yes | | | | | | |
| 26. | will continue to pay for the reasonable and necessar | or family members. The actual monthly expenses that you y care and support of an elderly, chronically ill, or disabled diate family who is unable to pay for such expenses. These if a qualified ABLE program. 26 U.S.C. § 529A(b). | \$0.00 | | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 63 of 69

| Debto | or 1 Steven Joseph Dombrovsky Case number (if known) | | |
|-------|--|----|--------|
| 27. | Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential. | | \$0.00 |
| 28. | Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8. | | |
| | If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. | | |
| | You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. | | |
| 29. | Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. | _ | \$0.00 |
| | You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. | | |
| | * Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment. | | |
| 30. | Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. | | |
| | To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. | | |
| | You must show that the additional amount claimed is reasonable and necessary. | | |
| 31. | Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4). | +_ | \$0.00 |
| | Do not include any amount more than 15% of your gross monthly income. | | |
| 32. | Add all of the additional expense deductions. Add lines 25 though 31. | | \$0.00 |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 64 of 69

| Debto | or 1 | Stev | en Joseph Do | ombrovsky | | | | Case n | umber (if known) | | |
|---|-----------------------------|--------|------------------------------|----------------|---------------------------------------|-------------------|--------------------|-------------------|--------------------------|-----------------|------------|
| Ded | Deductions for Debt Payment | | | | | | | | | | |
| 33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e. | | | | | | | | | | | |
| | | • | | • | ayment, add all amo | | contrac | ctually du | ue to each secured | d creditor in | |
| | the 60 | 0 mon | ths after you file | for bankrupto | cy. Then divide by 6 | 60. | | | | | |
| | | | | | | | | | verage monthly syment | | |
| | | Mort | gages on your | home | | | | | | | |
| | 33a. | Copy | / line 9b here | | | | | → | \$8,674.59 | | |
| | | Loar | ns on your first | two vehicles | • | | | | | | |
| | 33b. | | | | | | | | | | |
| | 33c. | | | | | | | → | \$0.00 | | |
| | | | other secured de | | Identific managements of | uhat D | | | | | |
| | | | ach creditor for red debt | | Identify property to secures the debt | | oes pa nclude t | yment taxes or | | | |
| | | | | | | iı | nsurano | ce? | | | |
| | | | | | | | _ 🗆 | No | | | |
| | | | | | | | | Yes | | | |
| | | | | | | | _ 뭐 | No Yes | | | |
| | | | | | | | | No . | | | |
| | | | | | | | _ 🗖 | Yes | | | |
| | 33e. | Tota | l average month | ly payment. | Add lines 33a throug | nh 33d | | | \$8,674.59 | Copy total here | \$8,674.59 |
| 34 | | | • | | secured by your p | | | | or other proper | • | |
| 54. | | • | • | | port of your dependent | • | acrice, e | a vernor | s, or other proper | ·y | |
| | п : | No. | Go to line 35. | | | | | | | | |
| | I | | • | • | ust pay to a creditor | | | - | | • | |
| | | | possession of y | our property (| called the cure amo | unt). Next, c | divide by | / 60 and | fill in the informati | on below. | |
| Nan | ne of t | he cre | editor | Identify pro | | Total cure amount | | | Monthly cure amount | | |
| | | | | | | | | | | | |
| SLS | S Mor | tgage | <u> </u> | Residence | ! | \$188,000 | <u>.00</u> ÷ | 60 = | \$3,133.33 | | |
| | | | | | | | ÷ | 60 = | | | |
| | | | | | | | | 00 | | | |
| | | | | | | | — · | 60 = 4 | - | | |
| | | | | | | | - | Total | \$3,133.33 | Copy total here | \$3,133.33 |
| 35. | Do vo | ou ow | e anv priority c | laimssuch | as a priority tax, ch | nild support. | or | | | - | |
| alimonythat are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. | | | | | | | | | | | |
| | | | Go to line 36. | | | | | | | | |
| | | | | mount of all o | of these priority clain | ns. Do not ir | nclude | | | | |
| | | | | | ims, such as those | | | | | | |
| | | | Total amount of | all past-due | oriority claims | | | | \$72,765.76 | ÷ 60 = | \$1,212.76 |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 65 of 69

| Debto | Steven Joseph Dombrovsky | Case number (if known) | | | | |
|-------|--|-------------------------|-----------------|-------------|--|--|
| 36. | Projected monthly Chapter 13 plan payment | \$4,513.47 | | | | |
| | Current multiplier for your district as stated on the list issued by the Adminis Office of the United States Courts (for districts in Alabama and North Caroliby the Executive Office for United States Trustees (for all other districts). | | | | | |
| | To find a list of district multipliers that includes your district, go online using specified in the separate instructions for this form. This list may also be av at the bankruptcy clerk's office. | | % | | | |
| | Average monthly administrative expense | \$297.89 | Copy total here | \$297.89 | | |
| 37. | Add all of the deductions for debt payment. Add lines 33g through 36. | | | \$13,318.57 | | |
| Tota | al Deductions from Income | | | | | |
| 38. | Add all of the allowed deductions. | | | | | |
| | Copy line 24, All of the expenses allowed under IRS expense allowances | \$3,103.63 | | | | |
| | Copy line 32, All of the additional expense deductions | \$0.00 | | | | |
| | Copy line 37, All of the deductions for debt payment | +\$13,318.57 | | | | |
| | Total deductions | \$16,422.20 | Copy total here | \$16,422.20 | | |
| | Copy your total current monthly income from line 14 of Form 122C-1, C Statement of Your Current Monthly Income and Calculation of Committee | Chapter 13 | | \$13,207.40 | | |
| 40. | Fill in any reasonably necessary income you receive for support of dependent of the monthly average of any child support payments, foster care payments, disability payments for a dependent child, reported in Part 1 of Form 122C-you received in accordance with applicable nonbankruptcy law to the extended for such child. | or 1, that | | | | |
| 41. | . Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). | | | | | |
| 42. | Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here | | | | | |
| 43. | Deduction for special circumstances. If special circumstances justify ac expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a deta explanation of the special circumstances and documentation for the expenses. | ailed | | | | |
| | Describe the special circumstances Amount of expen | se | | | | |
| | | _ | | | | |
| | | _ | | | | |
| | + | _ | | | | |
| | Total\$0.00 | Copy here → + \$0.00 | | | | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 66 of 69

| Debtor 1 | Steven Jose | ph Dombrovsky | | Case nu | umber (if known) | | |
|-----------------------|---|--|--|---------------|--|-----------------------|------------------------------|
| 44. Tota | al adjustments. | Add lines 40 through 43 | | | \$16,422.20 | Copy here | - \$16,422.20 |
| 45. Cal | culate your mont | hly disposable income under | § 1325(b)(2). Subtract lin | e 44 from I | ine 39. | | (\$3,214.80) |
| Part 3: | Change in | Income or Expenses | | | | | |
| virtu info line | ially certain to cha rmation below. Fo | r expenses. If the income in Fo nge after the date you filed your or example, if the wages reported olumn, explain why the wages in | bankruptcy petition and of increased after you filed | during the ti | ime your case will on, check 122C-1 | be open, in the first | fill in the column, enter |
| Fo | orm Line | Reason for change | | Date of cha | | rease or rease? | Amount of change |
| | 122C-1 122C-2 | | | | | Increase Decrease | |
| | 122C-1 122C-2 | | - | | | Increase Decrease | |
| | 122C-1 122C-2 | | | | | Increase Decrease | |
| | 122C-1 122C-2 | *************************************** | | | | Increase Decrease | |
| Part 4: | sign/Beloy | V | | | | | |
| X | even Joseph Dor | penalty of perjury you declare to mbrovsky, Debtor 1 | X | ature of De | | nments is t | true and correct. |
| 8.0 | MM / DD / Y | | Date | MM / DD |) / YYYY | - | |

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 67 of 69

| Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Law Offices Of Hagen & Hagen Jeffrey J Hagen - SBN 143754 (818) 501-6161 4559 San Blas Avenue Woodland Hills, California 91364 Fax: (818) 907-6722 jeff@hagenhagenlaw.com | FOR COURT USE ONLY |
|--|---|
| ☐ Debtor(s) appearing without attorney ☐ Attorney for Debtor | |
| UNITED STATES BACENTRAL DISTRICT OF CA | ANKRUPTCY COURT LIFORNIA - SAN FERNANDO VALLEY DIVISION |
| In re: | CASE NO.: |
| Steven Joseph Dombrovsky, fka | CHAPTER: 13 |
| Vyacheslav Dombrovsky, | |
| | VERIFICATION OF MASTER MAILING LIST OF CREDITORS |
| | [LBR 1007-1(a)] |
| | |
| Debtor(s). | |
| Pursuant to LBR 1007-1(a), the Debtor, or the Debtor penalty of perjury that the master mailing list of cre sheet(s) is complete, correct, and consistent we responsibility for errors and omissions. | otor's attorney if applicable, certifies under editors filed in this bankruptcy case, consisting of with the Debtor's schedules and I/we assume all |
| Date:11/20/2017 | Signature of Debtor 1 |
| Date: | Signature of Debtor 2 (joint debtor) (if applicable) |
| | - is ile led to be bed to be a control of the abblicable) |

This form is optional. It has been approved for use in the United States Bankruptcy Court for the Central District of California

Date: __11/20/2017

Signature of Afforney for Debtor (it applicable)

Barrett Daffin Frappier Treder & Weiss 20955 Pathfinder Road Unit 300 Diamond Bar, CA 91765

Barrett Daffin Frappier Treder & Weiss. 4004 Belt Line Road Unit 100 Addison, TX 75001-4320

California Franchise Tax Board POBox 942867 Sacramento, CA 94267

California Franchise Tax Board POBox 2952 Sacramento, CA 95812

CitiMortgage, Inc. POBox 78015 Phoenix, AZ 85062-8015

Internal Revenue Service POBox 7346 Philadelphia, PA 19101-7346

Internal Revenue Service Ogden, UT 84201-0039

Jeffrey J Hagen 4559 San Blas Avenue Woodland Hills, California 91364

Nataliya Sysoeva c/o Shapero & Shapero 5950 Canoga Avenue Unit 404 Woodland Hills, CA 91367

Case 1:17-bk-13103-VK Doc 1 Filed 11/20/17 Entered 11/20/17 10:36:19 Desc Main Document Page 69 of 69

Seterus POBox 1077 Hartford, CT 06143-1077

SLS Mortgage 8742 Lucent Boulevard Unit 300 Highlands Ranch, CO 80129